


# NEBRASKA ADOLESCENTS

## Major Causes of Premature Death and Disability

# 1999

Of the 2,098 Nebraska young people surveyed in grades 9–12...


Page 4  46% had ridden in a car with someone who had been drinking

Page 4  26% drove a motor vehicle after drinking alcohol during the past 12 months

Page 5  21% rarely or never wore a safety belt when riding in a car

Page 5  43% who rode a motorcycle during the past 12 months never/rarely wore a helmet


Page 5  94% who rode a bicycle never/rarely wore a helmet


Page 6  30% were in a physical fight during the past 12 months

Page 6  15% had carried a weapon during the past 30 days

Page 6  7% had been hit/slapped by boy/girlfriend during the past 12 months


Page 7  7% had been forced to have sexual intercourse when didn't want to

Page 7  17% seriously considered attempting suicide during the past 12 months

Page 8  38% had sexual intercourse at least once

Page 10  37% had smoked one or more cigarettes during the past 30 days

Page 11  31% of males had smoked cigars or cigarettos or little cigars during the past 30 days

Page 11  22% of males had used chewing tobacco or snuff during the past 30 days

Page 12  82% had drank alcohol

Page 12  56% had drank alcohol during the past 30 days

Page 12  41% had five or more drinks in a row in past 30 days

Page 14  65% had ever smoked a cigarette

Page 14  31% had ever used marijuana

Page 15  37% who had ever had sexual intercourse did not use a condom at last intercourse

Page 17  42% of females described themselves as overweight

Page 17  63% of females were trying to lose weight

Page 17  62% had exercised to lose weight

Page 18  57% watched TV for 2 or more hours a day on an average school day

Page 19  55% did not attend physical education classes in an average week

# Nebraska Adolescents: Their Risks for Premature Death and Disability

This report, prepared by the Nebraska Health and Human Services System (NHHSS), is about Nebraska’s adolescents and their health risks. It is based on the self-reported health behaviors of a random sample of 2,098 Nebraska young people in grades 9–12 enrolled in a sample of public schools in the spring of 1999.

## Background

In 1991, the U.S. Public Health Service produced a list of health goals for the nation titled *Healthy People 2000*. These goals have now been revised and restaged for the year 2010. To achieve the reductions in death and disabilities identified in these goals, it will be necessary to alter the environment to reduce certain health risks and to expand the delivery of health services. It will also be necessary for people to behave in different ways to reduce their personal health risks. For young people, reducing risky behaviors will reap lifelong benefits.

Beginning in 1990, the U.S. Centers for Disease Control and Prevention initiated a program of national and state surveys to provide careful estimates of behaviors related to poor health, disability, and premature death among young people. These surveys are known as the *Youth Risk Behavior Survey* (YRBS). The YRBS has been completed five times: 1991, 1993, 1995, 1997, and 1999.

## About the Youth Risk Behavior Survey (YRBS)

The YRBS was developed by the Division of Adolescent and School Health, National Center for Chronic Disease Prevention and Health Promotion of the Centers for Disease Control and Prevention (CDC) in collaboration with representatives from 71 state and local departments of education and 19 other federal agencies.

The YRBS monitors priority health-risk behaviors in six categories.

- Behaviors that result in unintentional and intentional injuries
- Tobacco use
- Alcohol and other drug use
- Sexual behaviors that result in HIV infection, other sexually transmitted diseases, and unintended pregnancies
- Dietary behaviors
- Physical activity

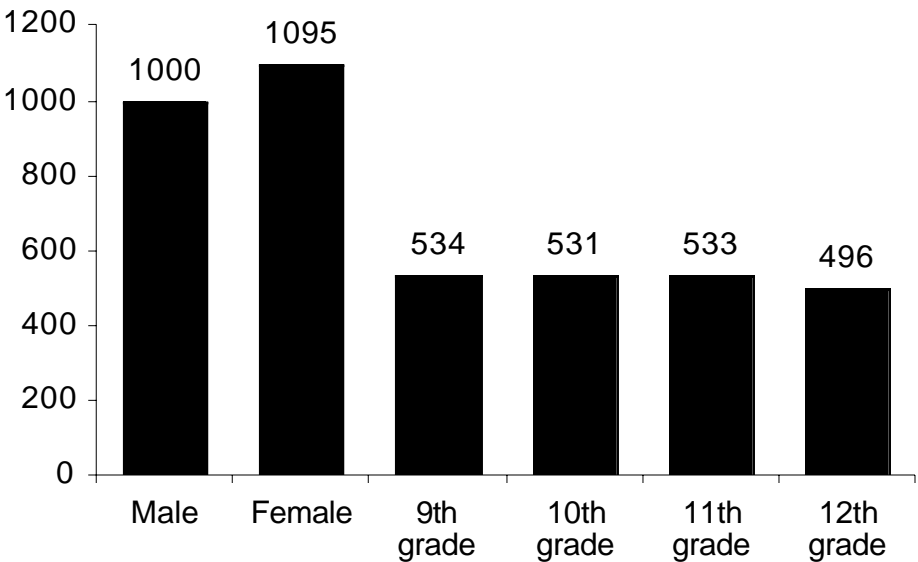
YRBS results can be used by state and local health and education agencies to: 1) monitor progress toward the national health goals; 2) focus comprehensive school health education teacher training and instructional programs; 3) support comprehensive school health programs; and 4) generate community and parental understanding of the challenges faced by schools and their teachers.

## The Nebraska 1999 YRBS

In the spring of 1999, 48 schools with students in grades 9-12 were randomly selected from all Nebraska public schools with students in these grades. Sixty percent of these schools agreed to participate in the YRBS. Two thousand and ninety-eight of the students in the 100 classrooms randomly selected at these schools completed the 87-question survey.

A number of urban schools with students in grades 9–12 chose not to participate in the 1999 YRBS. These survey results for grades 9–12 provide an important description of the priority health risk behaviors of the survey participants. The total sample, however, cannot be said to truly represent the state’s grade 9–12 students because it under-represents Nebraska’s urban adolescents.

Gender and grade of the respondents in the 1999 Nebraska Youth Risk Behavior Survey\*



\*Totals may not be equal to 2,098 because some of the students did not answer the gender or grade question.

Dear Teachers, School Administrators and Health Professionals:

A person's state of health is attributable to genetics, environment, medical service and lifestyle, with lifestyle playing the most prominent role in one's life expectancy. Lifestyle habits are generally developed at an early age, and follow us for life, such as tobacco use, exercise and diet. Choices made by youth will often follow them for the rest of their lives and many choices being made by Nebraska's youth will not contribute to their good healthy body now and into adulthood.

A sample of Nebraska's young people in public schools in grades 9-12 have participated in the U.S. Centers for Disease Control and Prevention's Youth Risk Behavior Survey (YRBS) every two years since 1991. YRBS estimates the level of risky behaviors among young people in eight areas: intentional and unintentional injuries, tobacco use, alcohol use, other drug use, sexual behavior, nutrition, and exercise. These are the behaviors that cause or contribute to the greatest number of premature deaths and disabilities.

The results of past surveys have been used to plan public health and education programs to generate public support for health promotion initiatives, and to help community leaders and parents develop local and personal ways to assist young people. These results show how Nebraska compares with the rest of the country, and they challenge our ideas of what is acceptable. They also identify areas where we are doing better than most others.

Over time these results and others suggest the differences between boys and girls in the rates of risky behaviors is decreasing, as are the differences between young people in rural and urban communities.

- Tobacco is the principal cause of premature death in our society, and our young people unfortunately continue to smoke and use smokeless tobacco at unacceptable levels.
- Young people are over-represented in the number of traffic crashes and the injuries and deaths that result. Alcohol is the principal contributing factor and as this report shows, a significant proportion of our young people drink regularly and drink large quantities of alcohol in short periods of time: binge drinking. Intentional and unintentional injuries are equally distressing. Too many of our young people are drinking and driving or riding in cars with drivers who had been drinking. Too few use the safety belts. Our rates of tobacco and alcohol tend to be higher than other states.
- The data on sexual behavior show that unacceptable proportions of young people are sexually active. Sexual activity at a young age, and with multiple partners, not only places young women at risk of an undesired pregnancy, but expose partners to the risk of acquiring a sexually transmitted disease that may result in infertility and life-long problems.
- Answers to exercise and nutrition questions suggest that young girls imagine themselves to be overweight-when in reality more boys are overweight or at risk of being overweight. This fear of being overweight has encouraged patterns of poor eating. Exercise patterns suggest that less than half of our young people are enrolled in daily PE classes. Obesity as a youth tends to lead to obesity as an adult with all of the medical problems and shortened life expectancy associated with excess weight. Exercise habits developed in our youthful years also tend to follow us into adulthood.

I urge all Nebraskans to examine this report and to become involved in local community efforts to address the issues highlighted here. Whole communities need to come together to find ways to help young people reduce their risky health-related behaviors.

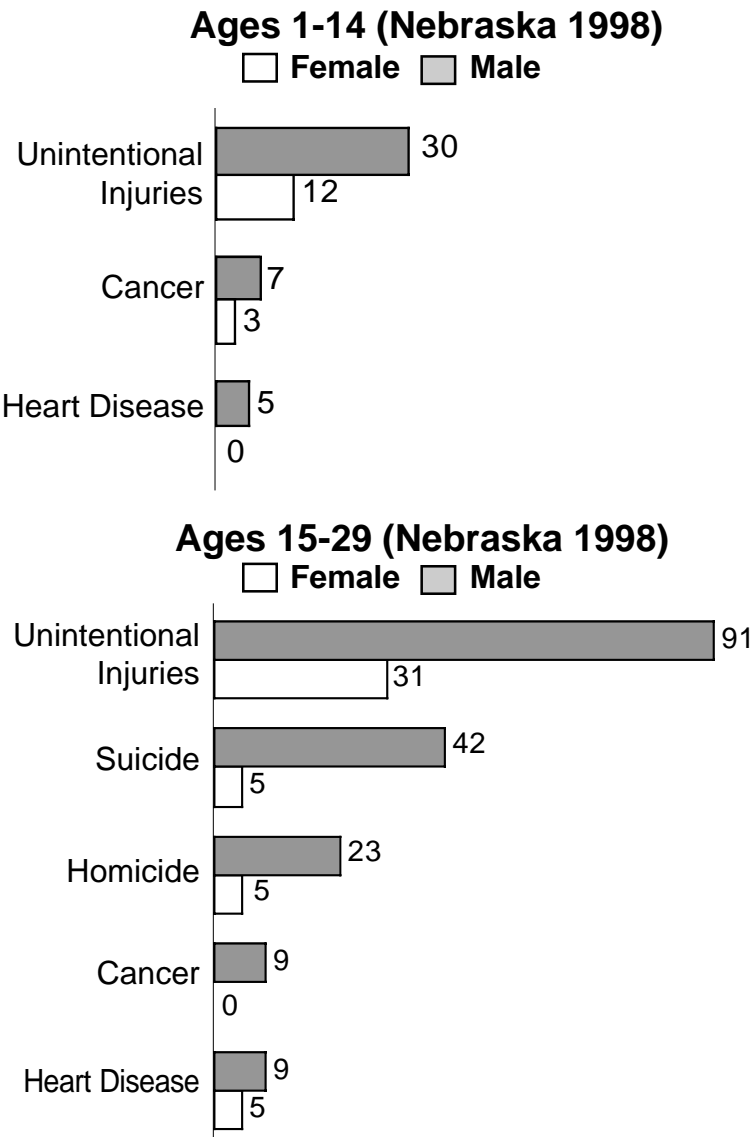
Parents, schools, the faith community, government, law enforcement, and business leaders can lead the way to significant changes. The information in this report, and other Nebraska Health & Human Services System reports, can give direction to these community initiatives.

Sincerely,

Richard Raymond, M.D.  
Chief Medical Officer

What kills young people?

Nebraska's statistics on the leading causes of death are not kept by age or grade in school in a way that corresponds to the information in this report. NHHSS reports deaths for children and young people ages 1 to 14 and ages 15 to 29. Nevertheless, statistics on the causes of death are informative. The table below shows the total number of deaths by cause, age group and gender for 1998. Aggregating data for the years 1989-1998 for ages 1-19 years is also reported below.



Source: NHHSS

Selected Causes of Death, By Frequency  
Ages 1-19 in Nebraska, 1989-1998

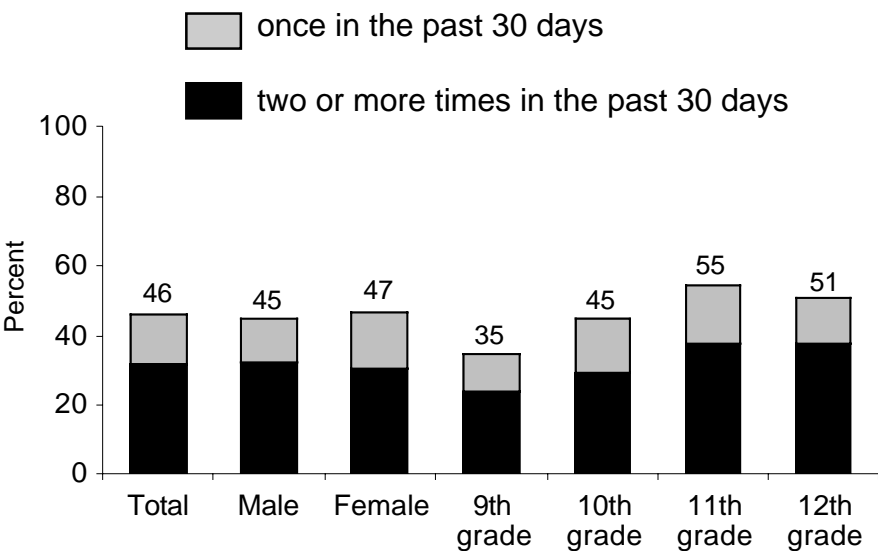
Causes	Frequency
Motor Vehicle Crashes	616
Non Motor Vehicle Crashes	283
Suicide	176
Cancer	146
Homicide	122
Birth Defects	77
Heart	72
Pneumonia	29
Communicable Diseases	29
Cerebrovascular Disease	13
AIDS	6
Diabetes	4
All Other Causes	256
TOTAL	1,829

Source: Kids Count in Nebraska 1999 Report

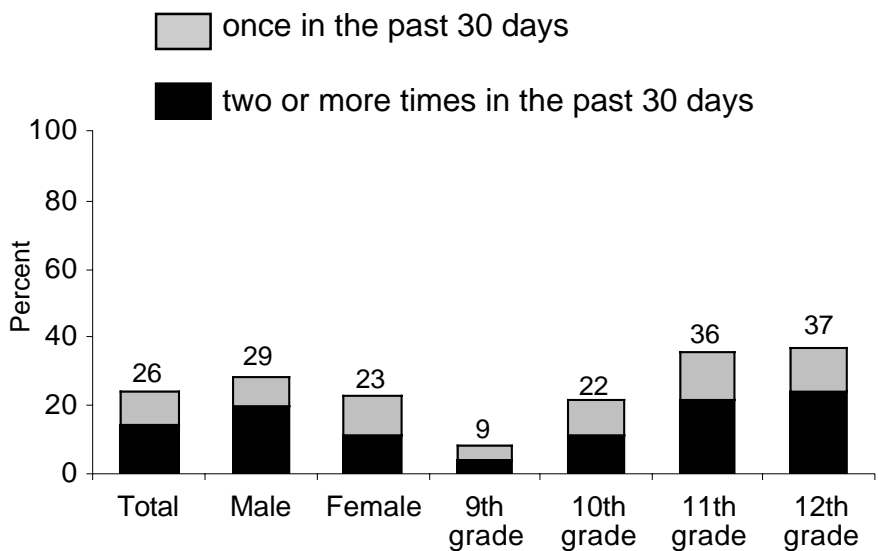
# Alcohol and Motor Vehicle Crashes . . .

- ◆ Automobile crashes are the leading cause of death among young people ages 15 to 24. Alcohol use is the principal contributor to automobile crashes.
- ◆ In Nebraska in 1998, 23% of all alcohol-related motor vehicle crashes involved drivers between the ages of 15 and 20. Nebraska's legal drinking age is 21.<sup>1</sup>
- ◆ Drivers aged 15-24 years of age had the highest percentage of fatal (28%) motor vehicle crashes and the highest percent of all motor vehicle crashes (34%).
- ◆ 60% of the respondents in this 1999 YRBS who had driven a car or other vehicle after drinking alcohol had done it two or more times in the past 30 days.
- ◆ 46% of the young people in grades 9-12 in this survey said they had ridden in a car in the past 30 days with a driver who had been drinking.
- ◆ As accident severity increases, so does the likelihood of alcohol involvement.
- ◆ The frequency of riding with a driver who has been drinking compounds the risk. The majority (70%) of the respondents in grades 9-12 who rode in a car or other vehicle driven by someone who had been drinking alcohol had done so two or more times in the past 30 days.
- ◆ 26% of the grade 9-12 respondents said they had driven after drinking alcohol in the previous 30 days.

Percentage of students who rode in a car or other vehicle driven by someone who had been drinking alcohol

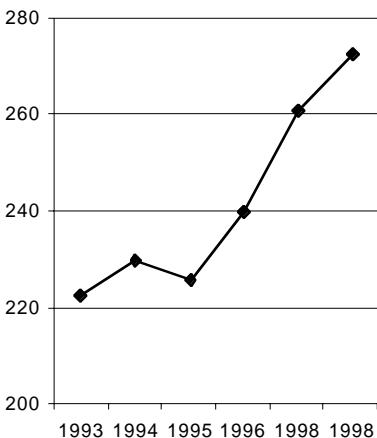


Percentage of students who drove a car or other vehicle when they had been drinking alcohol

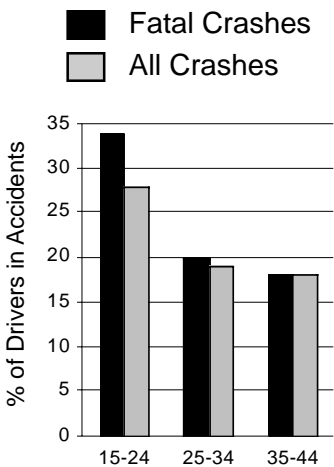


## Putting Alcohol and Motor Vehicle Crashes in Perspective . .

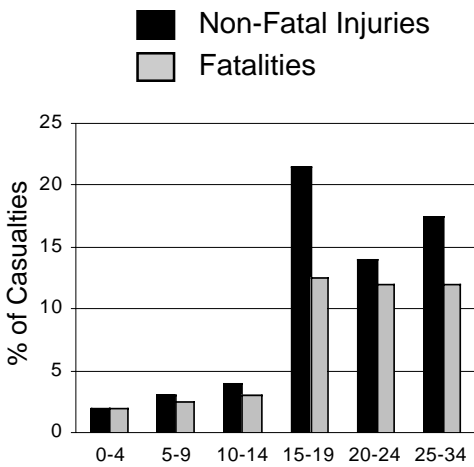
Trend in Fatal Crashes



Age of Driver



Age of Casualties



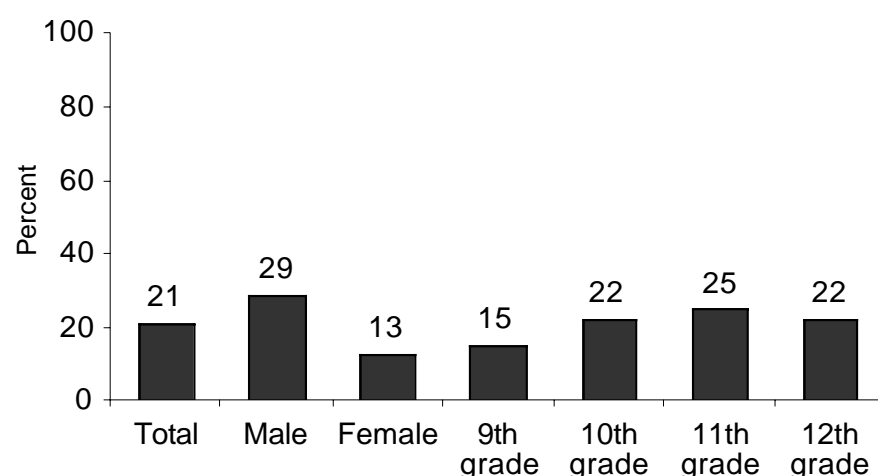
Fatal automobile crashes are increasing. The youngest drivers have the most crashes and the most injuries and fatalities.

Source: Nebraska Dept. of Roads: Traffic Accident Facts 1998<sup>1</sup>

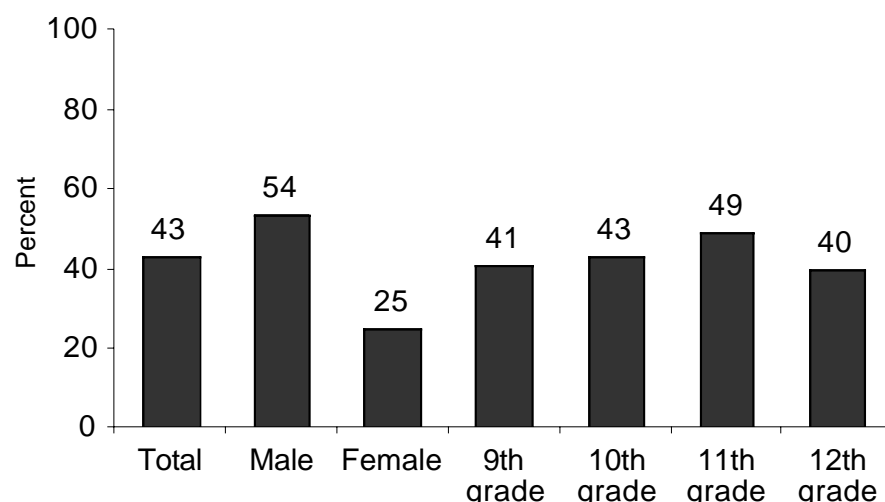
# Unintentional Injuries . . .

- ◆ In 1998 in Nebraska, motor vehicle crashes killed 315 people and injured 30,581 people. In total there were 48,183 motor vehicle crashes involving 79,807 drivers.<sup>1</sup>
- ◆ The single most effective way to reduce deaths and injuries from motor vehicle crashes is to wear safety belts at all times when riding in or driving a vehicle.
- ◆ Observational surveys in the summer of 1999 indicated that 68% of Nebraska drivers and front-seat passengers wear safety belts.<sup>2</sup>
- ◆ In Nebraska in 1999, 26% of grade 9–12 students reported always wearing their safety belts when riding as a passenger in a vehicle. This means that about 74% of Nebraska young people wear their safety belts only occasionally or never.
- ◆ It is estimated that half of automobile crash deaths and injuries could be prevented if safety belts were always worn.
- ◆ Safety belt use is estimated to reduce the risk of fatal motor vehicle injury by 45%.<sup>3</sup>
- ◆ Motorcycle helmet use in Nebraska has been required by law since 1989. Despite the law, 54% of males and 25% of females in grades 9-12 who had ridden on a motorcycle in the last 12 months reported never or rarely wearing their helmets.
- ◆ Head injuries are the leading cause of death in motorcycle and bicycle crashes.<sup>4</sup> Unhelmeted motorcyclists are twice as likely to get a fatal head injury and three times as likely to get a nonfatal head injury as are helmeted riders.<sup>5</sup>

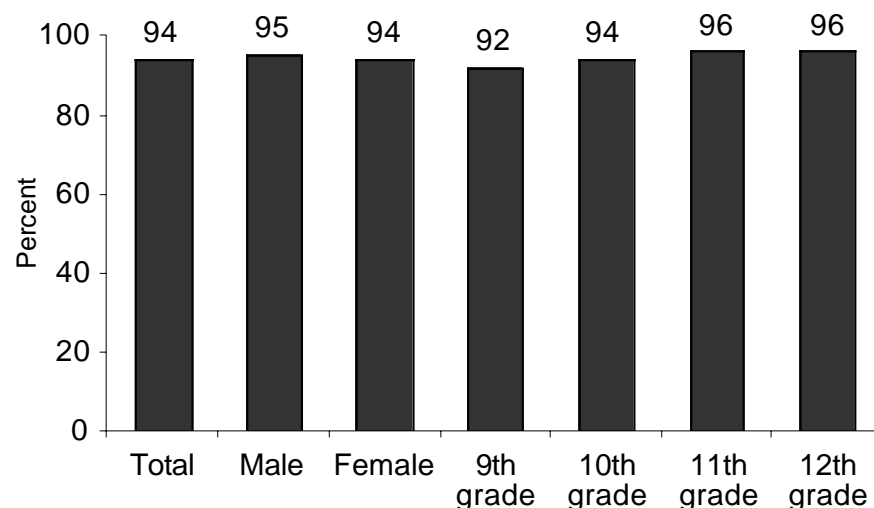
**Percentage of students who never or rarely wore a safety belt when riding in a car driven by someone else**



**Percentage of students who rode motorcycles in the past 12 months and never or rarely wore crash helmets**



**Percentage of students who rode a bicycle in the last 12 months and never or rarely wore a bike helmet**



"If I was in an accident I'd hate to have them say on the news that I wasn't wearing my seat belt."

— 17-year-old girl

"Personally, I don't wear a seat belt because I think it gives you the sissy look."

—boy, no age given

Why wear a bike helmet? "Falling off a bike is harmless."

—boy, no age given

# Violence . . .

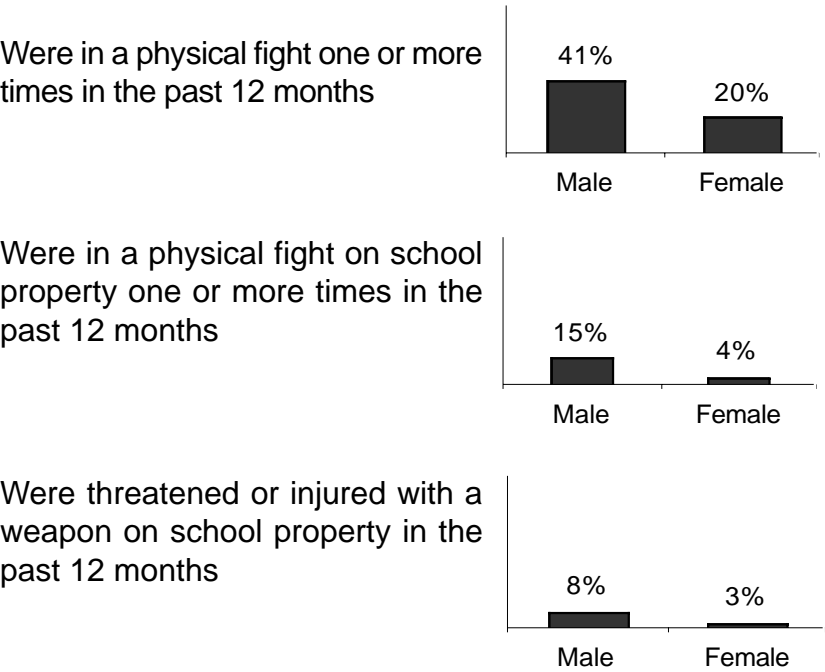
There are three types of violence: 1) violence against another person such as fights, assaults, and murder; 2) violence against oneself—suicide; and 3) violence against property, as in vandalism.

## Nationally . . .

- ◆ Homicide is the second leading cause of death among all youth aged 15-24 and is the leading cause of death among black youth aged 15-24.<sup>6</sup>
- ◆ During adolescence, homicide rates increase substantially from a negligible rate in youth aged 5-14 to 20.3 per 100,000 in youth aged 15-24.<sup>7</sup>
- ◆ Firearms markedly elevate the severity of the health consequences of violent behavior.<sup>7</sup>
- ◆ Unintentional firearm-related fatalities also are a critical problem among children and young adults in the United States.<sup>7</sup>
- ◆ Forced sex has been associated with suicidal ideating and attempts,<sup>8</sup> alcohol and drug use,<sup>9</sup> and increased risk of chronic disease.
- ◆ Suicide is the third leading cause of death among youth aged 15-24 and the second leading cause of death among white youth aged 15-24.<sup>6</sup> In the United States the suicide rate for persons aged 15-24 has tripled since 1950.<sup>6,10</sup>

## Fighting is a problem in and of itself, and it can lead to the use of weapons.

### Percentage of students who . . .



**Violence and Injuries**

4% of the males and 1% of the females report being injured in a physical fight in the past 12 months and had to be treated by a doctor or nurse.

"I've seen a catalog that is absolutely amazing, the weapons you can get and junior high kids have had these catalogs."

—parent

"I've seen a couple of people at my school who have guns, .22's, .35's—handguns mostly. Actually, now a days the ammunition is harder to find than the gun."

—boy, no age given

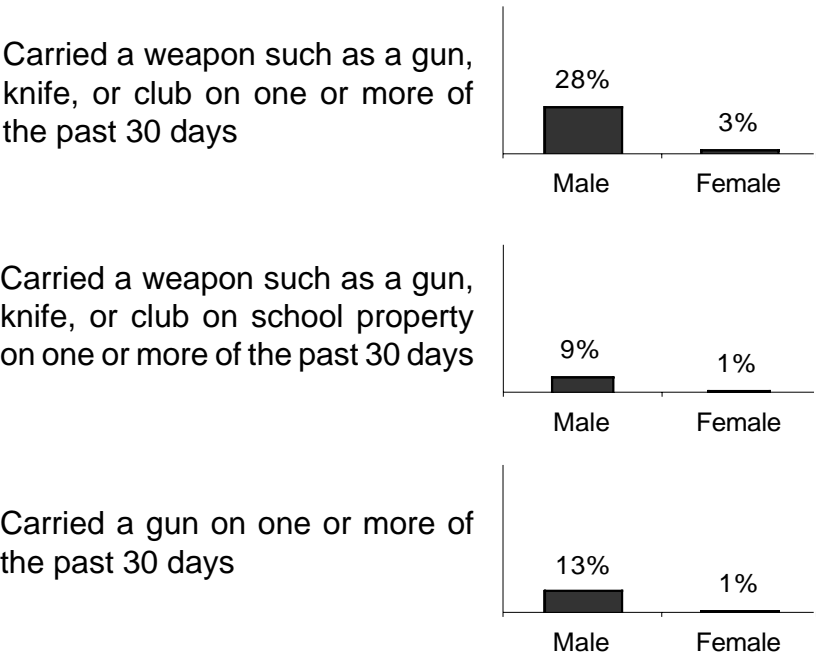
"There are kids that, you can tell by their attitudes and what they do, that they do either appreciate their life or they don't. Maybe you could help them by making them appreciate who they are. I think the reason they act the way they do is because they feel that nobody really cares."

—14-year-old girl

## Weapons among high school students

Adolescent homicides are more common in the USA than in any other developed country in the world.<sup>6</sup> About nine out of every ten homicide victims are killed by a weapon such as a gun, knife or club.<sup>8</sup>

### Percentage of students who . . .



## Nebraska students feel safe in school . . .

Less than 3% of males and 1% of females said they did not go to school on one or more of the past 30 days because they felt unsafe.

### Violence and Dating

7% of the males and 8% of the females report being hit, slapped, or physically hurt by their boyfriend or girlfriend during the previous 12 months.

### Violence and Sex

4% of the males and 10% of the females report ever having been forced to have sexual intercourse when they didn't want to.

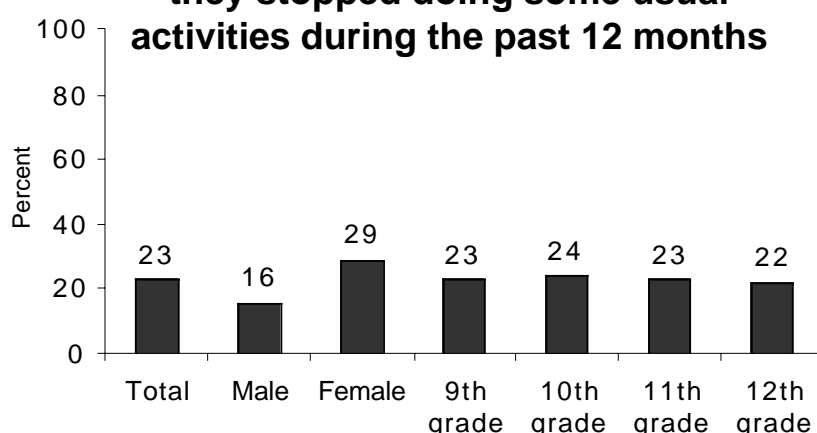
"It's real easy to give up just because there's so many different problems with school, with home life and everything. My school has 8 to 10 counselors. Counseling appointments are 15 minutes. If you've got a problem you're not going to deal with it and say, 'Oh boy! I'm happy now!' in 15 minutes! There's probably 1,500 students in my school. I can't figure eight people can handle it."

—boy, no age given

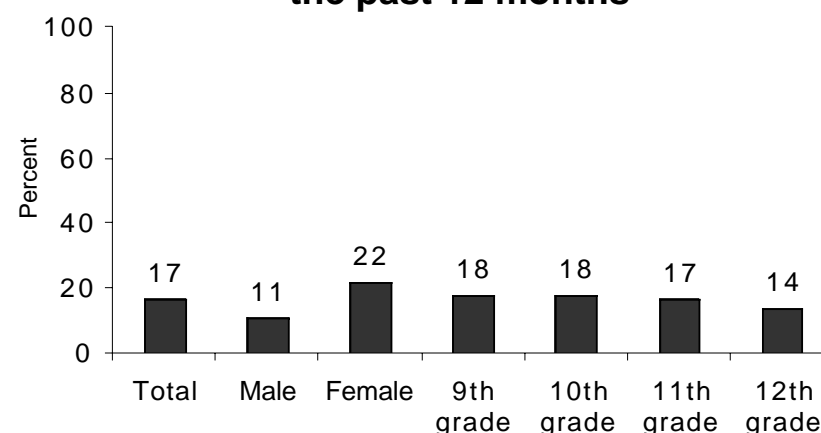
## Suicide is violence against oneself . . .

Percentage of students who . . .

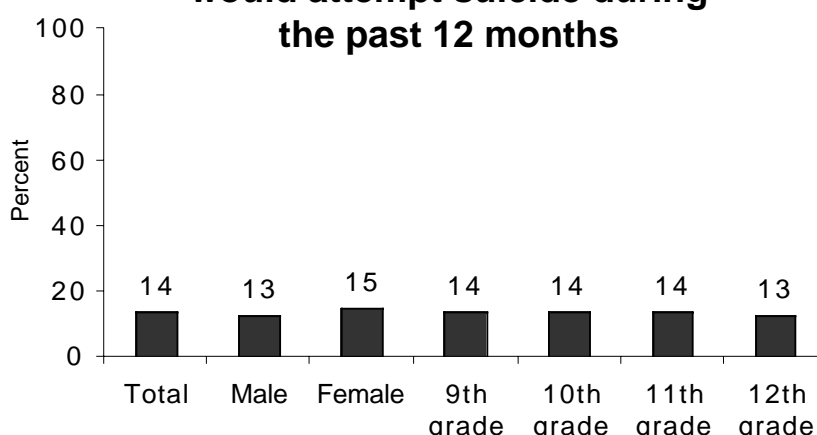
### Ever felt so sad or hopeless almost every day for two weeks or more that they stopped doing some usual activities during the past 12 months



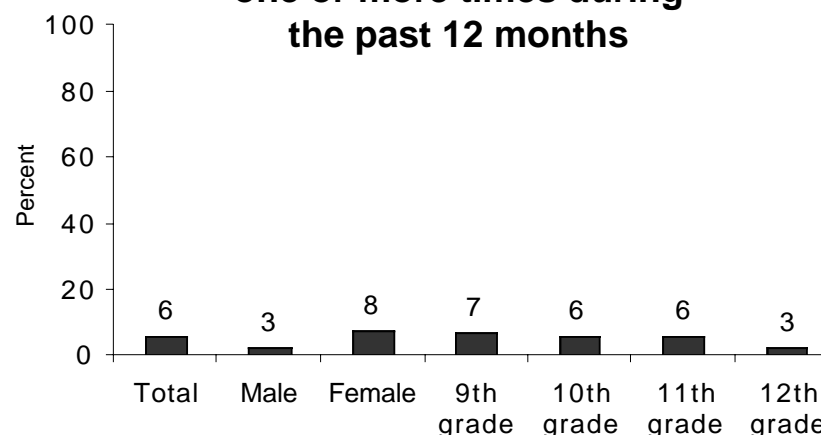
### Seriously considered attempting suicide during the past 12 months



### Made a plan about how they would attempt suicide during the past 12 months



### Actually attempted suicide one or more times during the past 12 months

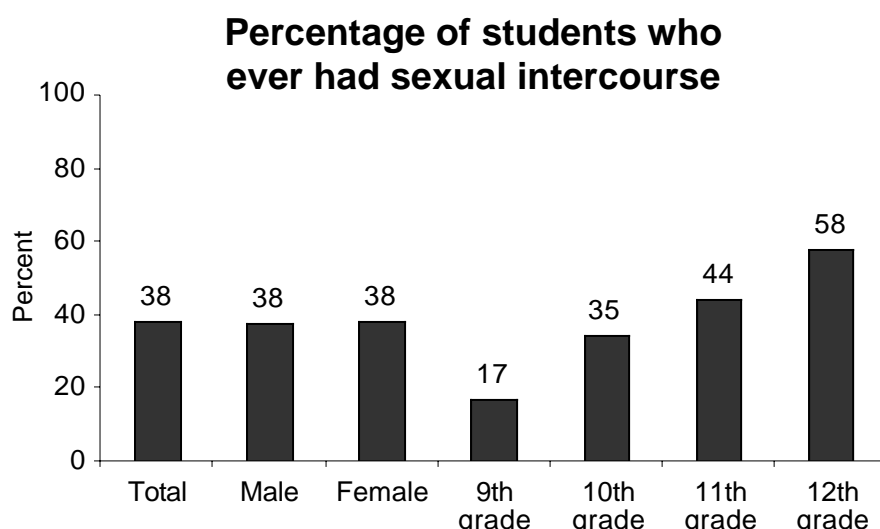


"I think we have a lot of angry kids out there, they're angry at the circumstances they're in. Self-esteem and self-image, I think that's where we have to start with them, but it has to be a joint effort. They need to learn **how** to make choices and play the 'what if' game—what if I do this? What's going to happen? Will I feel good about myself if I do this? Can I get up in the morning and look myself in the mirror and like that person I see?"

—parent

# Sexual Behavior . . .

- ◆ Early sexual activity is associated with unwanted pregnancy, sexually transmitted diseases (STD's), including HIV infection, and negative effects on social and psychological development.<sup>11</sup>
- ◆ The number of sexual partners and age of first intercourse are associated with increased risk for sexually transmitted diseases (STD's).<sup>11</sup>
- ◆ Alcohol and other drug use may serve as predisposing factors for initiating sexual activity and unprotected intercourse.<sup>12</sup>
- ◆ Nationwide AIDS is the 6<sup>th</sup> leading cause of death for youth aged 15-24.<sup>6</sup>
- ◆ Constant correct use of latex condoms by males is highly effective at reducing the risk of HIV/AIDS and other sexually transmitted diseases (STD's).<sup>13</sup>
- ◆ Pregnancies that occur during adolescence place both mothers and infants at risk for lifelong social and economic disadvantages.<sup>11</sup>
- ◆ In 1998, 1,332 Nebraska teens aged 13-17 became pregnant; 846 delivered and 479 obtained an abortion.

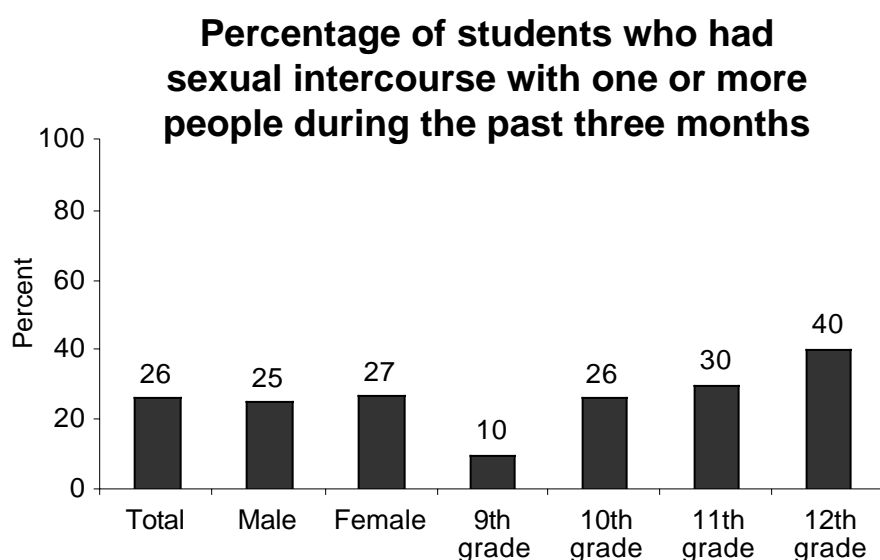


"When I lost my virginity I cried and cried, I just felt so bad. I had no idea why I was crying. I felt I had lost a part of me."  
 —18-year-old girl

## In 1998 2,483 Nebraska girls aged 13-19 years of age gave birth

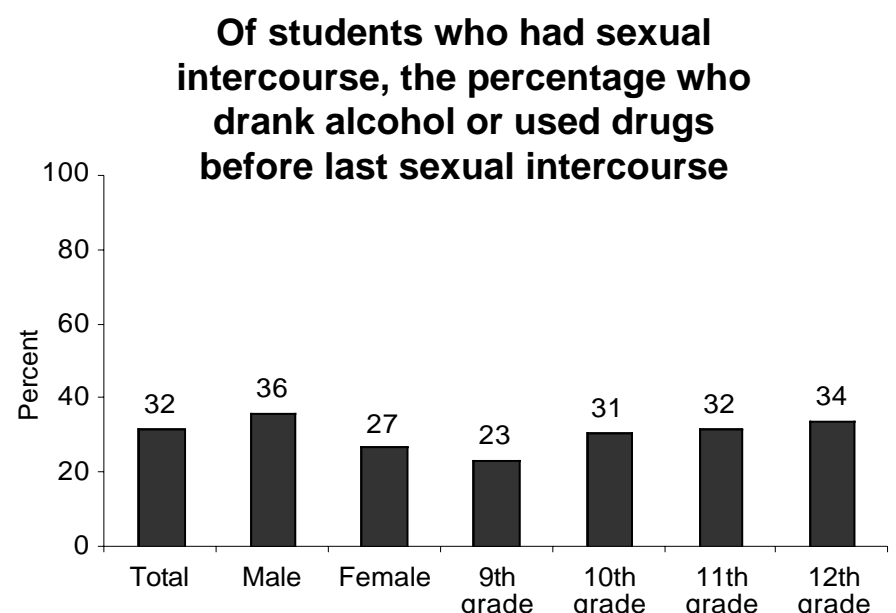
- ◆ no births to 10 to 12-year-old girls
- ◆ 4 births to 13-year-old girls
- ◆ 29 births to 14-year-old girls
- ◆ 103 births to 15-year-old girls
- ◆ 236 births to 16-year-old girls
- ◆ 472 births to 17-year-old girls
- ◆ 479 teens had abortions
- ◆ 1,154 females aged 10-19 had positive tests for chlamydia

Source: NHHSS



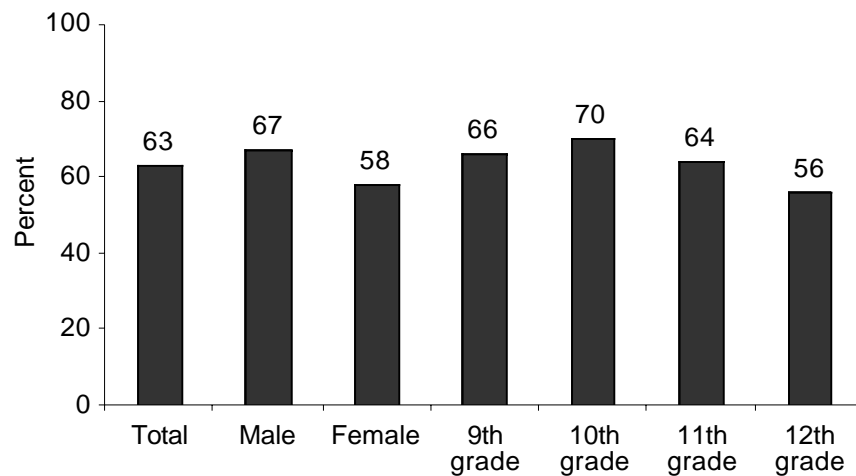
## Condom use reported by sexually active high school seniors:

1993 - 54%  
 1995 - 64%  
 1997 - 63%  
 1999 - 63%

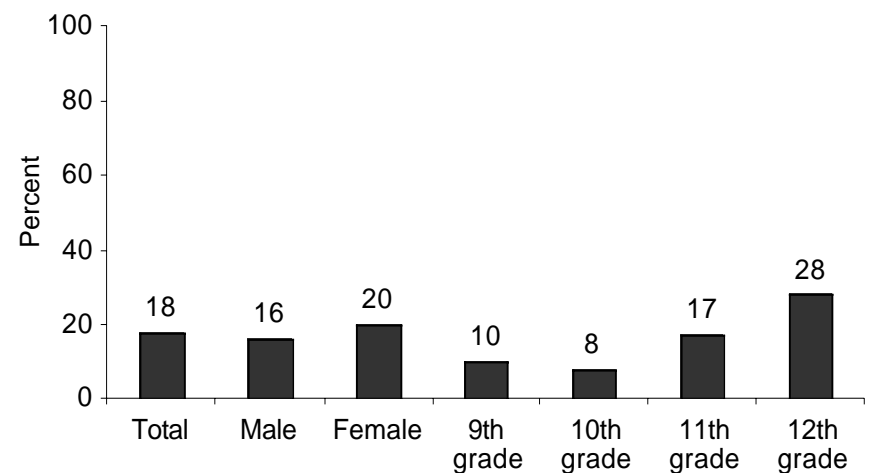




**Percent of sexually active students who used or who's partner used a condom during last sexual intercourse**



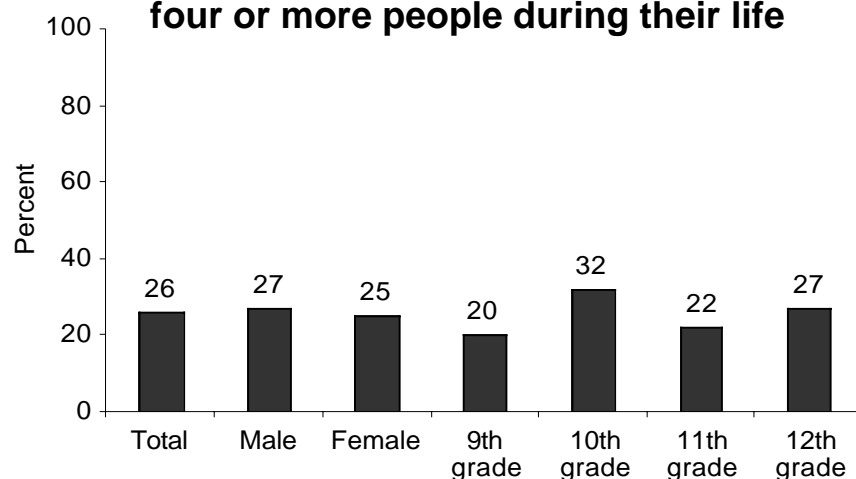
**Percent of sexually active students who used birth control pills during last sexual intercourse**



"I've known kids that have bets as to how many times they can get laid in a certain amount of time by different people."

—17-year-old boy

**Percent of sexually active students who have had sexual intercourse with four or more people during their life**

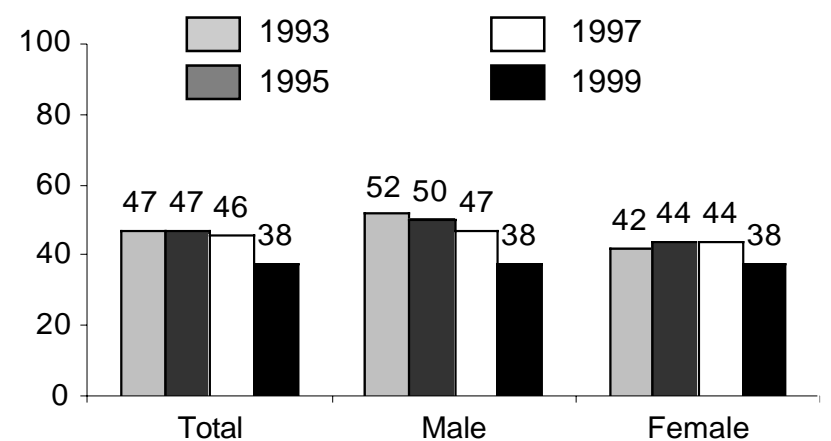


"I don't even know why they call it 'date rape', because it's just 'rape' plain and simple."

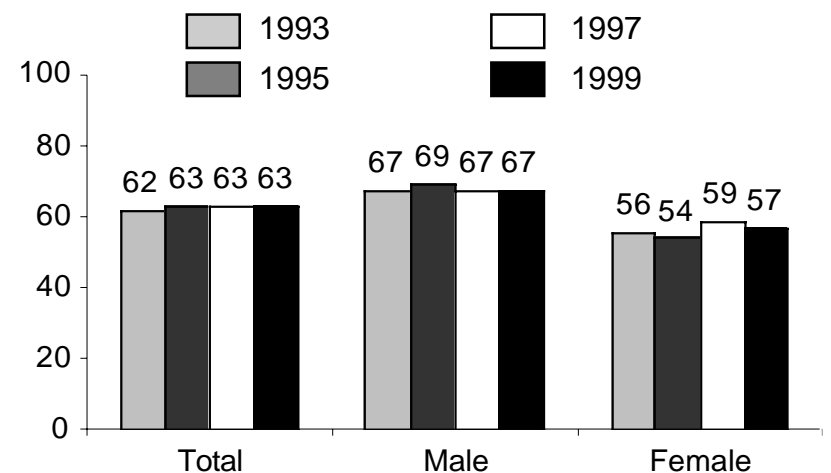
—16-year-old boy

## ***Trends in Sexual Behavior . . .***

**Students who have ever had sexual intercourse**



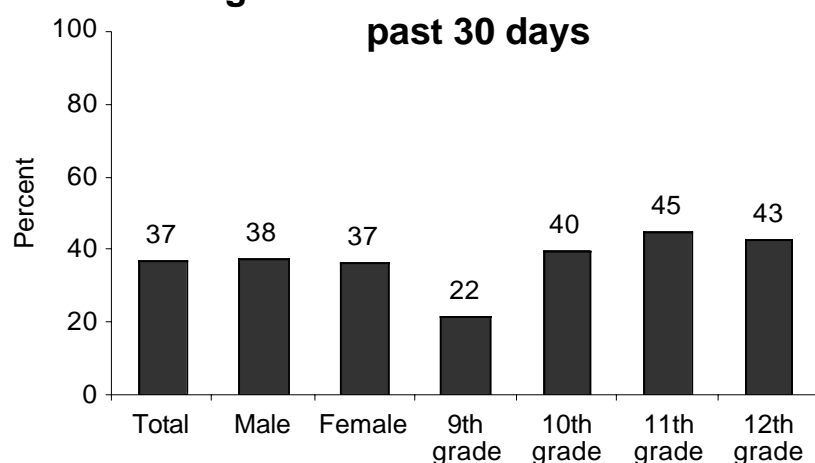
**Sexually active students who used a condom the last time they had sexual intercourse**



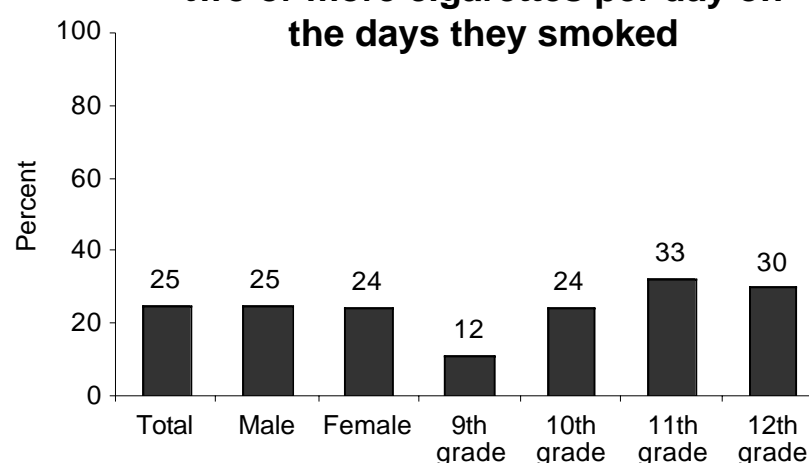
# Tobacco—the product that kills the most people . . .

- ◆ Tobacco is the most preventable cause of death in the United States.<sup>14</sup>
- ◆ Each year tobacco kills more people than drugs, AIDS, homicide, suicide, motor vehicle crashes, and alcohol.<sup>14</sup>
- ◆ Cigarette smoking is responsible for heart disease; cancers of the lung, larynx, mouth, esophagus, and bladder; stroke; and chronic obstructive pulmonary disease.<sup>14</sup> If current patterns of smoking behavior persist, an estimated 5 million U.S. persons who were aged 0-17 years in 1995 could die prematurely from smoking-related illnesses.<sup>15</sup>
- ◆ Smokeless tobacco is associated with leukoplakia, oral cancers, tooth and gum disease, and cardiovascular disease.<sup>14</sup>
- ◆ Between 1970 and 1986, the prevalence of snuff use increased 15 times and chewing tobacco use increased four times among men aged 17-19.<sup>14</sup>
- ◆ Cigar smoking is associated with cancers of the oral cavity, larynx, esophagus, and lung and with chronic obstructive lung disease.<sup>16</sup>
- ◆ Environmental tobacco smoke (ETS)—smoke from other people's tobacco products causes considerable discomfort and illness among non smokers.

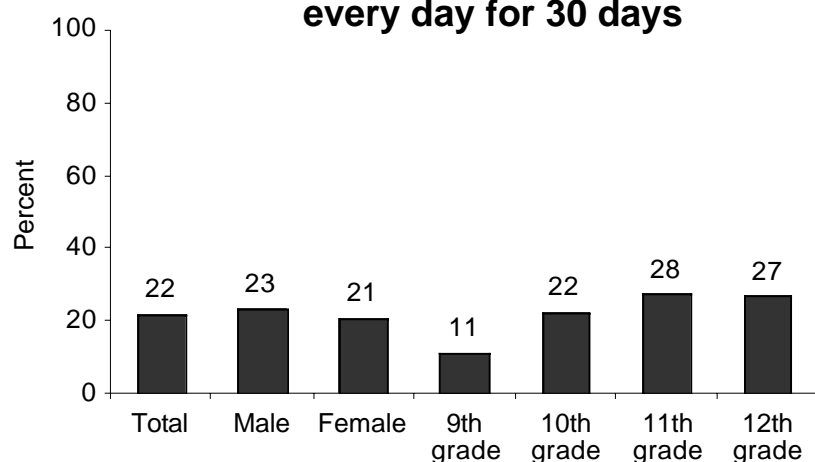
**Percentage of students who smoked cigarettes on one or more of the past 30 days**



**Percentage of students who smoked two or more cigarettes per day on the days they smoked**



**Percentage of students who smoked at least one cigarette every day for 30 days**



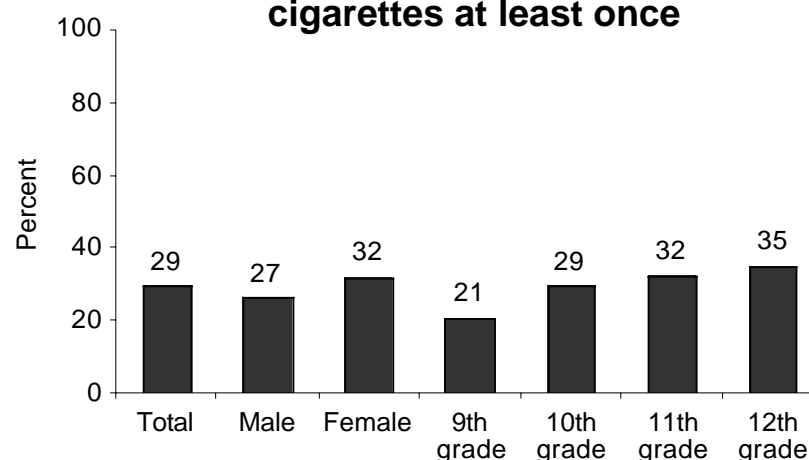
**Asked for Proof of Age to Buy Cigarettes**

1995	38%
1997	55%
1999	61%

"I think your friends have a big impact because they'll start smoking and they say, 'Oh, well, just try it,' you may just because you want to stay their friend . . . I think they can change your mind."

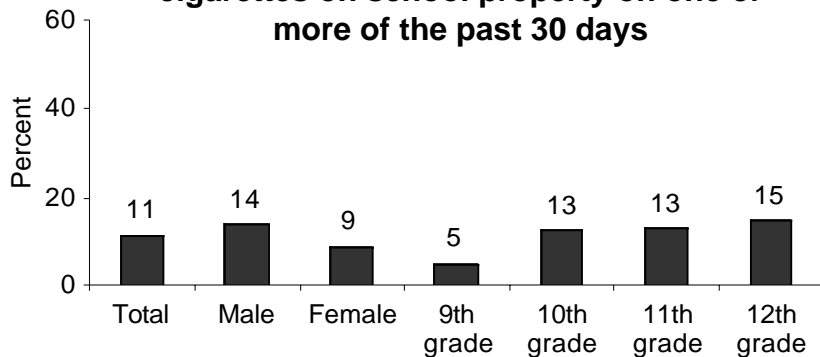
—14-year-old girl

**Percentage of students who have tried to quit smoking cigarettes at least once**

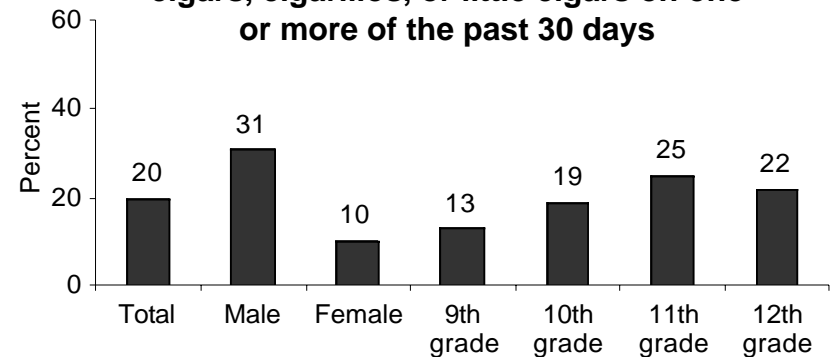


"I've seen a lot of juniors and sophomores leave the building and go out in the parking lot to smoke. Their parents don't really care, some of them, they can smoke at home if they want."  
—18-year-old girl

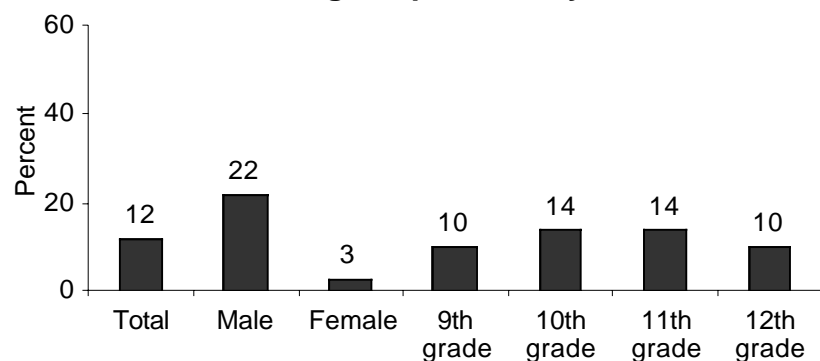
**Percentage of students who smoked cigarettes on school property on one or more of the past 30 days**



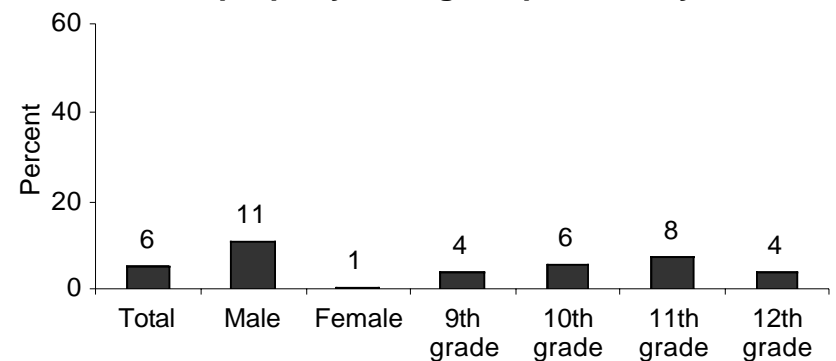
**Percentage of students who smoked cigars, cigarillos, or little cigars on one or more of the past 30 days**



**Percentage of students who used chewing tobacco or snuff during the past 30 days**



**Percentage of students who used chewing tobacco or snuff on school property during the past 30 days**



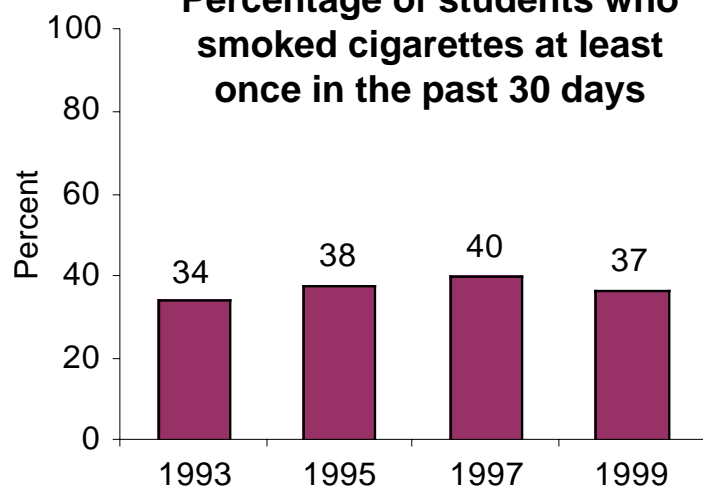
"My 16-year-old smokes and I smoke, so I feel like I don't have room to talk... From all the stuff I've read and been told, nicotine is one of the most addictive drugs that we have...Again, I'm a smoker, and I know full well how powerful a drug it is because I've tried to quit and not been successful in the 30 years I've been smoking cigarettes." —parent

### How Students Get Cigarettes . . .

<u>Males</u>	<u>Females</u>	
27%	18%	purchase them
31%	41%	borrow them
28%	37%	get someone else to buy
6%	1%	steal them
8%	3%	get them some other way

### Tobacco Trends . . .

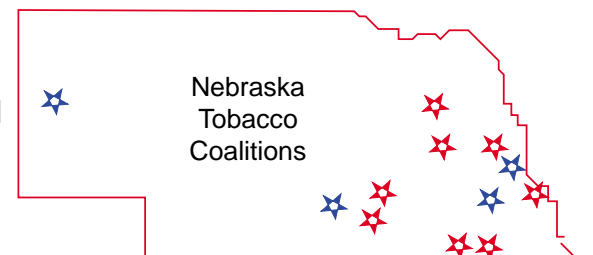
**Percentage of students who smoked cigarettes at least once in the past 30 days**



### Community Involvement

Never before have so many people supported policy and legislative action to reduce youth smoking. Join a local coalition and add your assistance.

Call 1-800-745-9311 or in Lincoln, call 471-2101.



# Alcohol—the drug that kills adolescents most often . . .

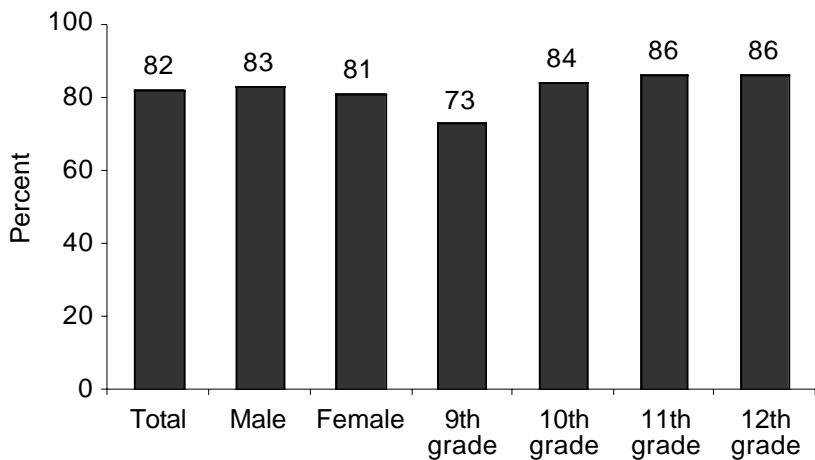
- ♦ Alcohol is a major contributing factor in approximately half of all motor vehicle crashes, homicides and suicides, which are the leading causes of death and disability among young people.<sup>17</sup>
- ♦ Heavy drinking among young people has been linked to multiple sexual partners, the use of marijuana, and poor academic performance in school.<sup>18</sup>
- ♦ 82% of the 9th–12th grade students surveyed in 1999 had at least one drink of alcohol during their life.
- ♦ More than half had at least one or more drinks of alcohol on one or more of the last 30 days.
- ♦ 26% had their first drink of alcohol prior to age 13.

## Binge Drinking

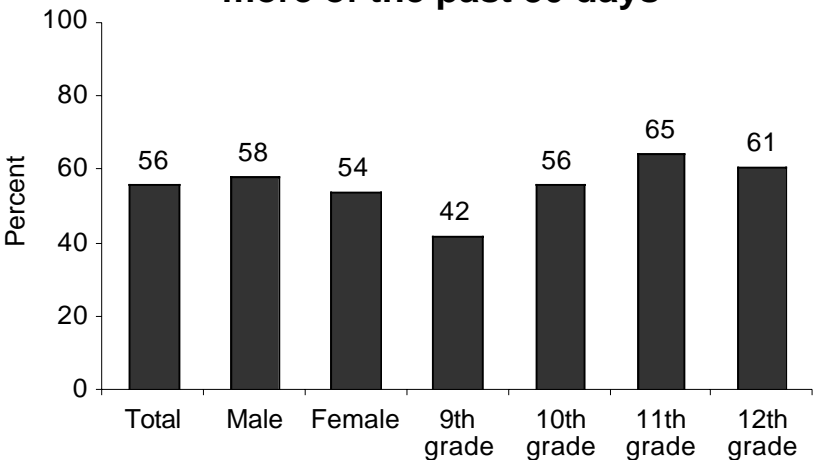
Binge drinking is defined as drinking five or more drinks within a couple of hours was defined as binge drinking.

- ♦ 43.7% of the boys and 38% of the girls had binged on alcohol at least once in the last 30 days.

Percentage of students who had at least one drink of alcohol during their lifetime



Percentage of students who had at least one drink of alcohol on one or more of the past 30 days



## Binging Begins Early In High School

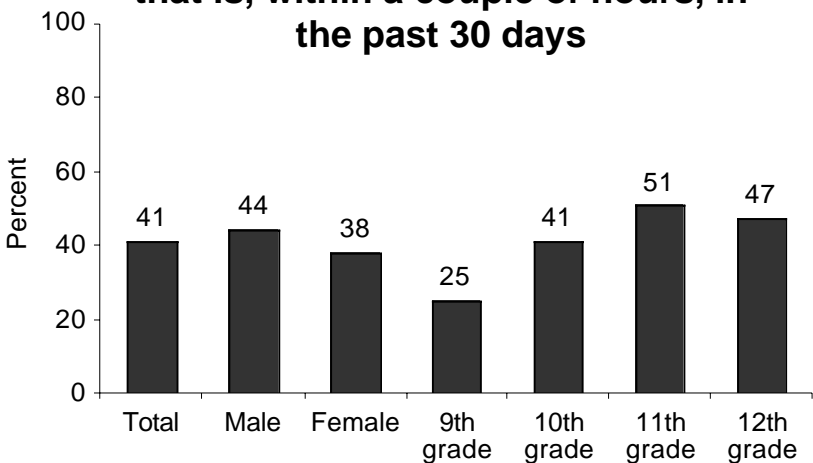
Universities inherit students who began binging in high school.

The University of Nebraska-Lincoln's NU Directions, funded with \$700,000 from the Robert Wood Johnson Foundation and significant local assistance, aims to reduce high risk drinking.

"Curbing college drinking is difficult because typically high schools, their communities, and parents have tolerated early drinking, establishing a culture of binging acceptance. Unless parents, high schools, and community leaders create enforceable standards for alcohol use, it's unrealistic to expect universities and colleges to solve the problem."

—College Professor

Percentage of students who had five or more drinks of alcohol in a row, that is, within a couple of hours, in the past 30 days



"Kids just get together in a big group and it's just kind of to relieve stress. They look forward to the weekends because that's when they're going to get rid of everything they've been feeling, it's their time to look cool."

—16 year-old-girl

"I know people who sit at school and they're like, 'Oh, I'm getting so drunk this weekend!' You know, that's messed up!"

—18-year-old boy

"Too many high schoolers can go into bars with fake ID's or find buyers."

—16-year-old girl

"As a parent, it's real hard to be told 'Your son has been drinking and he needs to be home.' I've been told that a few times and I'm not sure what to do about it. I keep threatening my son and it still doesn't seem to work...I think parents need to learn how to deal with this problem because it'll get worse before it gets any better."

—parent

"My parents always lecture me about not drinking and stuff. They say it's bad for me and all that, but I still drink anyway...My parents really couldn't stop me. They've tried and it hasn't worked so far."

—15-year-old girl

Alcohol Use Is Part of Many Issues

Alcohol & Auto Crashes .....

see page 4

Alcohol & Violence .....

see page 6

Alcohol & Sex .....

see page 8

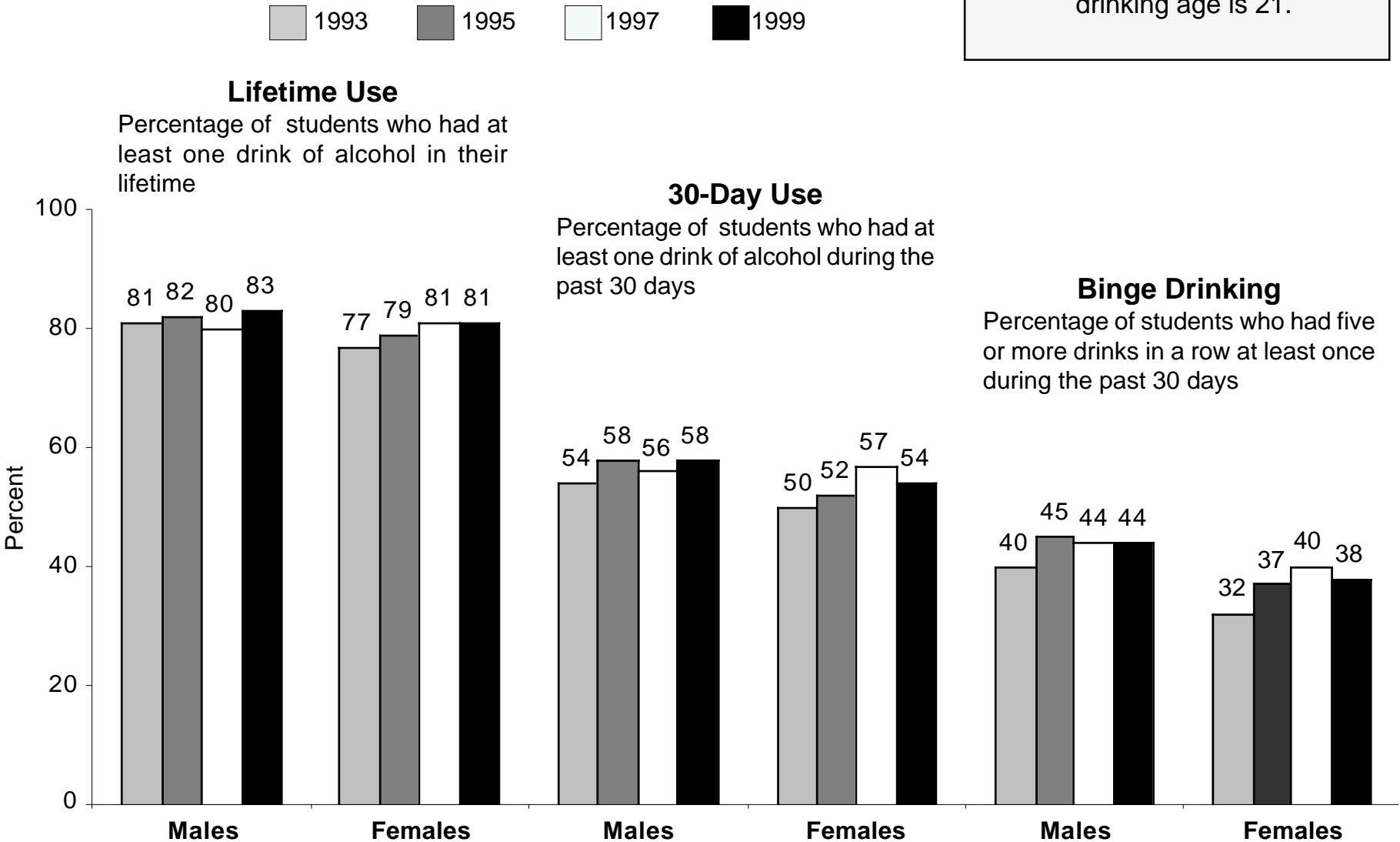
Alcohol and Other Drugs .....

see page 13

# What's Happening Over Time?

- ◆ No real change in the number of 9th-12th graders who have used alcohol.
- ◆ No evidence of a pattern of reduced alcohol use in the past 30 days.
- ◆ No evidence of a reduced rate in binge drinking.

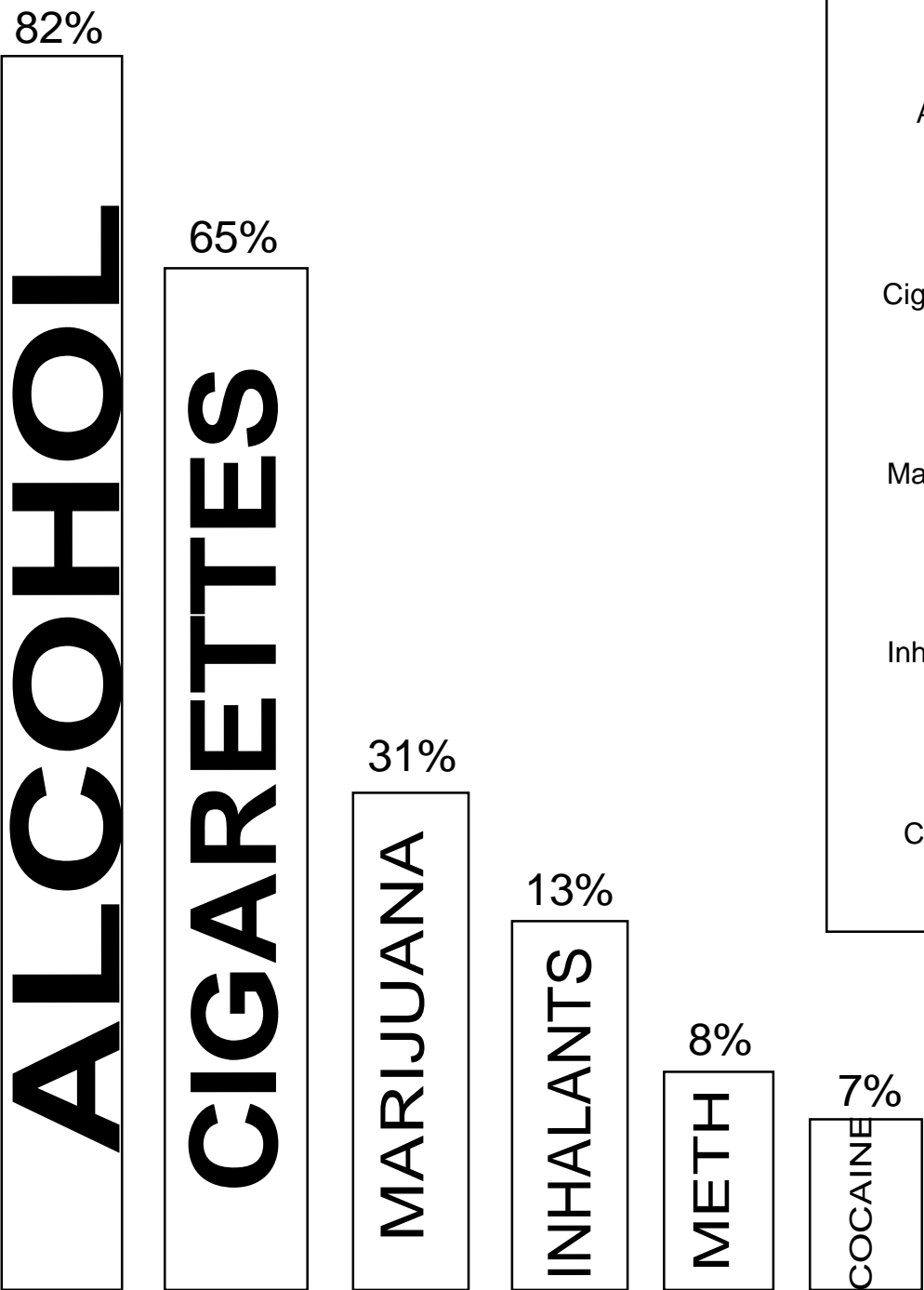
In Nebraska in 1998, 28% of all fatal alcohol-related motor vehicle crashes involved drivers between the ages of 15 and 20. Nebraska's legal drinking age is 21.



# Other Drugs . . .

- ◆ 21% of the boys and 13% of the girls in grades 9-12 said someone had offered them an illegal drug on school property during the past 12 months.
- ◆ 15% of the boys and 11% of the girls had sniffed glue, aerosols, spray cans, or other inhalants one or more times in their lifetime.
- ◆ 7% of the boys and 3% of the girls tried marijuana before age 13.
- ◆ 19% of the boys and 13% of the girls had used marijuana one or more times in the past 30 days.

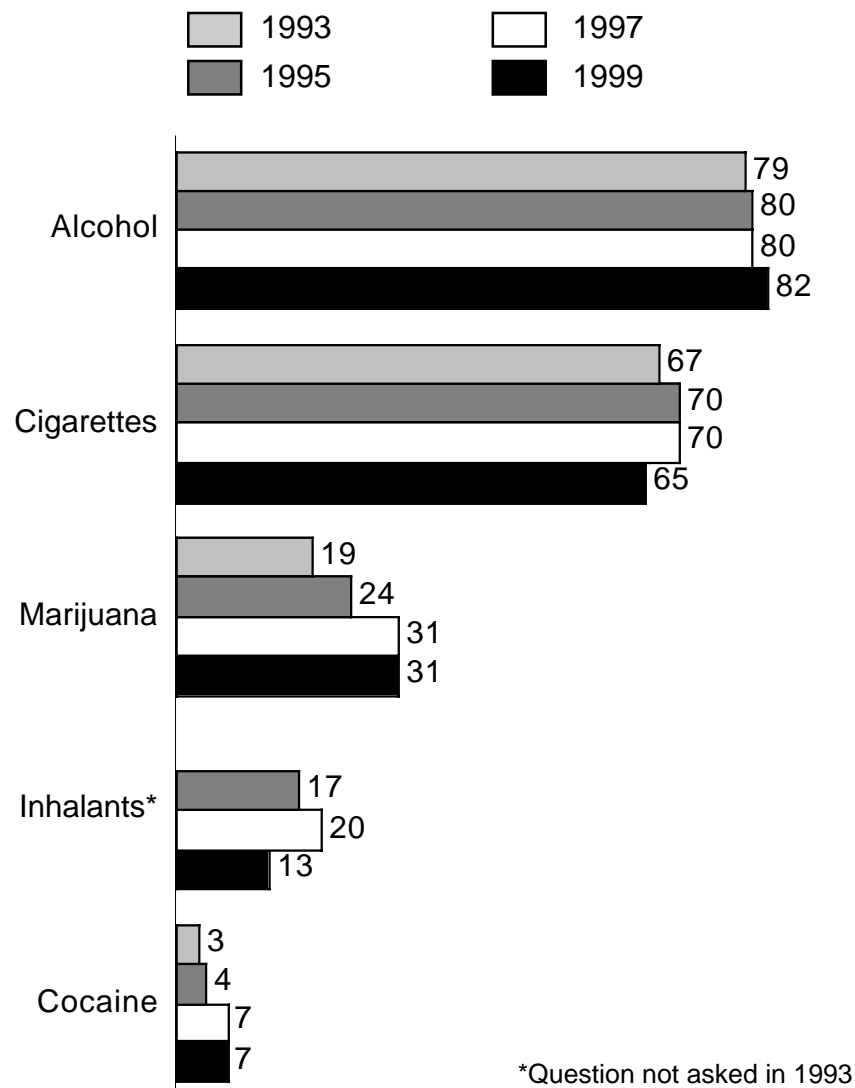
## The percentage of students who reported ever using . . .



In this survey, inhalants included glue, the contents of aerosol cans, paints, sprays, and motor fuels that are inhaled. Cocaine included powder, crack and freebase. Meth refers to methamphetamines (also called speed, crystal, crank, or ice). Percentages represent the number of students who used a substance at least once.

## Trends . . .

### Percent of students who have ever tried . . .



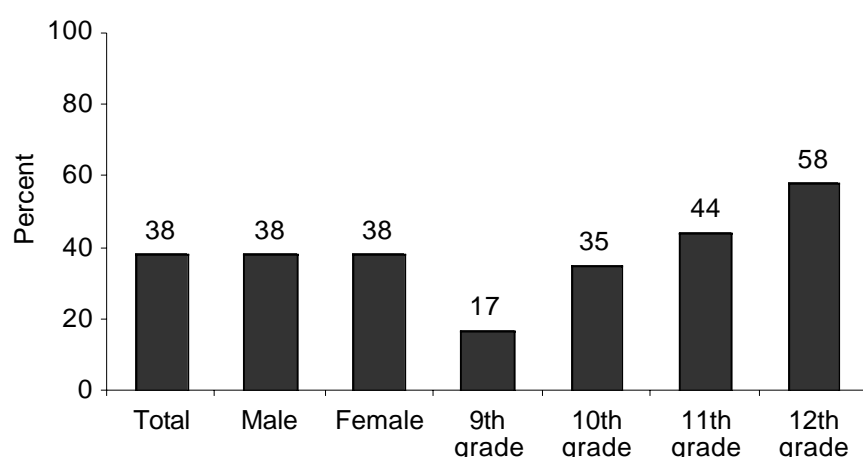
"Marijuana would probably be the one that everyone, I mean, the people that do drugs, are probably doing."  
—14-year-old boy

"I flipped out when I heard my little brother was sniffin' glue and crap out of aerosol cans. I thought only idiots did that and then I find out it's my brother. Little kids sniffin' stuff is bad. Something should be done about that."  
—18-year-old boy

# HIV/AIDS . . .

- ◆ HIV stands for Human Immunodeficiency Virus. HIV is the virus that causes the fatal disease AIDS. AIDS stands for Acquired Immune Deficiency Syndrome.
- ◆ Good medical care can significantly extend the life of people infected with HIV, but as yet there is no cure.
- ◆ Parents can greatly contribute to reducing sexually transmitted diseases (STD's), including HIV infection, by talking to their young people about the causes of these diseases.
- ◆ People become infected with HIV through:
  - Having sex (vaginal, oral, or anal) with someone who has the virus.
  - Sharing needles and syringes with someone who has the virus.
  - A baby's exposure to his or her infected mother during pregnancy or birth or through breast feeding.

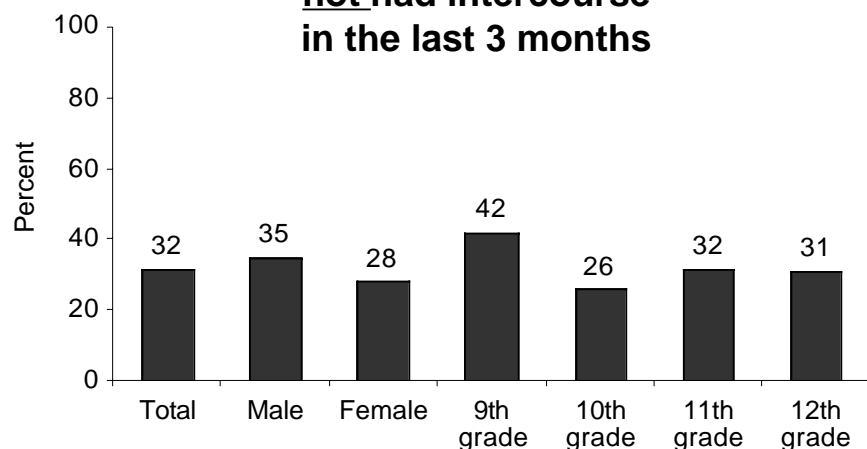
**Percentage of students who have had sexual intercourse at least once**



"I think focusing on it as a collective problem and not just that it's a gay/lesbian problem, that it's a drug-user problem, that it is a problem that we're all dealing with as members of society."

—parent

**Percentage of the sexually active students who had not had intercourse in the last 3 months**



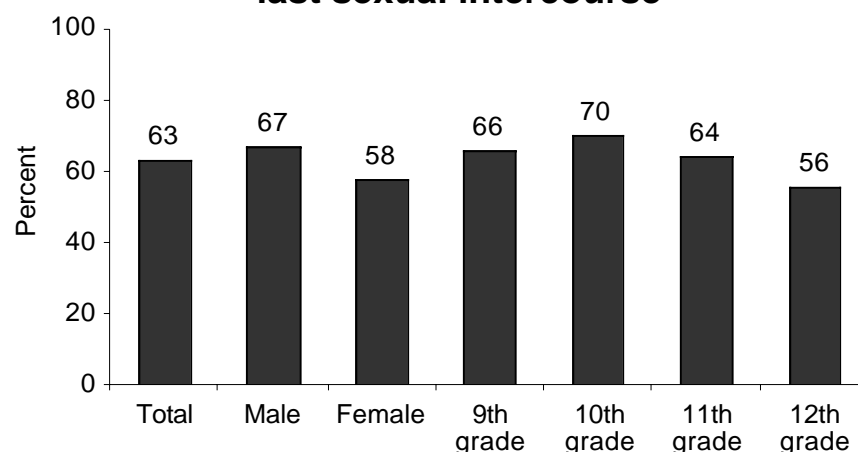
"To be safe you have to be informed. I'm one of the HIV peer educators. We go around and talk to other people at other schools. But I remember when they came and talked to me at my school--I didn't pay much attention."

—male high school student

## Condom Use

Condom use **does not eliminate** the risk of being infected with HIV/AIDS or any other sexually transmitted disease. When used consistently and correctly, condoms can reduce the risk of spreading sexually transmitted diseases.<sup>11</sup> Abstinence is the only certain way to eliminate the risk of STD's.

**Percentage of the sexually active students who used or whose partner used a condom during last sexual intercourse**



"That choice about sex when you're in seventh grade, eighth grade, or ninth grade can affect the rest of your life. I mean you could be dead before you're 20!"

—18-year-old boy

# Nutrition . . .

- ◆ Adequate nutrition is essential for growth and development.
- ◆ Eating patterns that begin in infancy and develop through childhood and adolescence effect health later in life.<sup>19</sup>
- ◆ Four of the ten leading causes of death, coronary heart disease, some cancers, stroke and diabetes are related to eating patterns, often established early in life.<sup>20</sup>
- ◆ These health conditions cost the country an estimated \$200 billion in medical expenses and lost productivity.<sup>20</sup>
- ◆ As a nation we are consuming increasing numbers of calories but not compensating with increased physical activity. Obesity acquired during childhood and adolescence, if it persists into adulthood, increases the risk for chronic health problems.<sup>20</sup>
- ◆ The high priority for thinness during adolescence may contribute to eating disorders such as anorexia nervosa and bulimia.<sup>19</sup>
- ◆ Ninety percent of all people with anorexia nervosa and bulimia are females.<sup>19</sup>

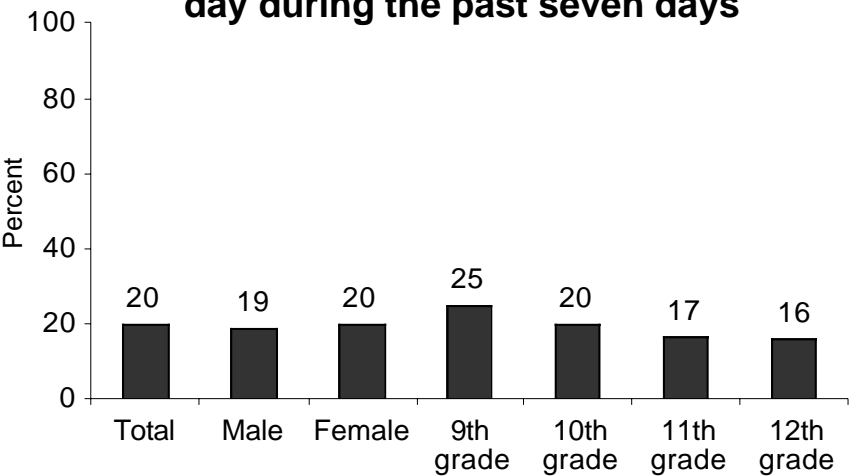
## Parent Influence or Nutrition Education?

In two food choices there were patterns of eating/drinking different from the others.

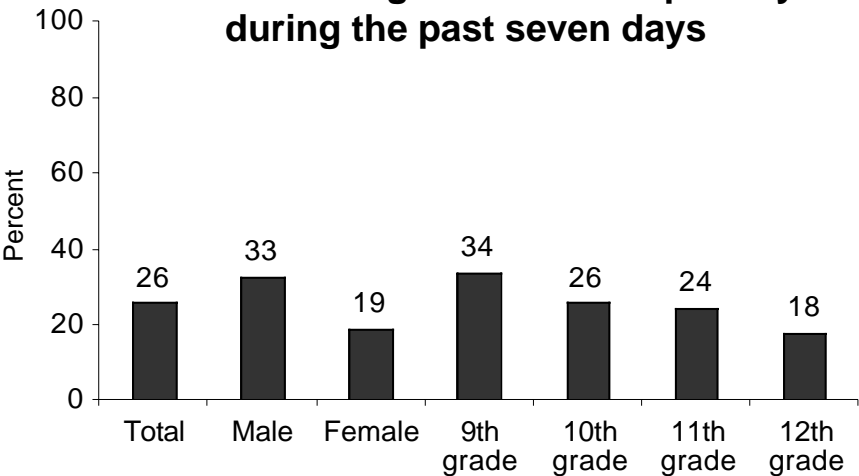
The proportion of students who ate five or more servings of fruit and vegetables per day during the past seven days (the recommended amount) declined with grade level.

The proportion of students who consumed three or more glasses of milk per day during the past seven days differed significantly for males and females, and also declined with grade level.

Percentage of students who ate five or more servings of fruits & vegetables per day during the past seven days



Percentage of students who drank three or more glasses of milk per day during the past seven days



"The girls are more aware of what they eat because they're worried about how they squeeze into those pants. The guys, they try to eat as much as they can to bulk up."

—18-year-old boy

"I don't have breakfast because I wake up late and I take a shower and put on my clothes and by that time I have to go to the bus."

—14-year-old boy

## Wise Choices?

Students recall what they had eaten during the past seven days.

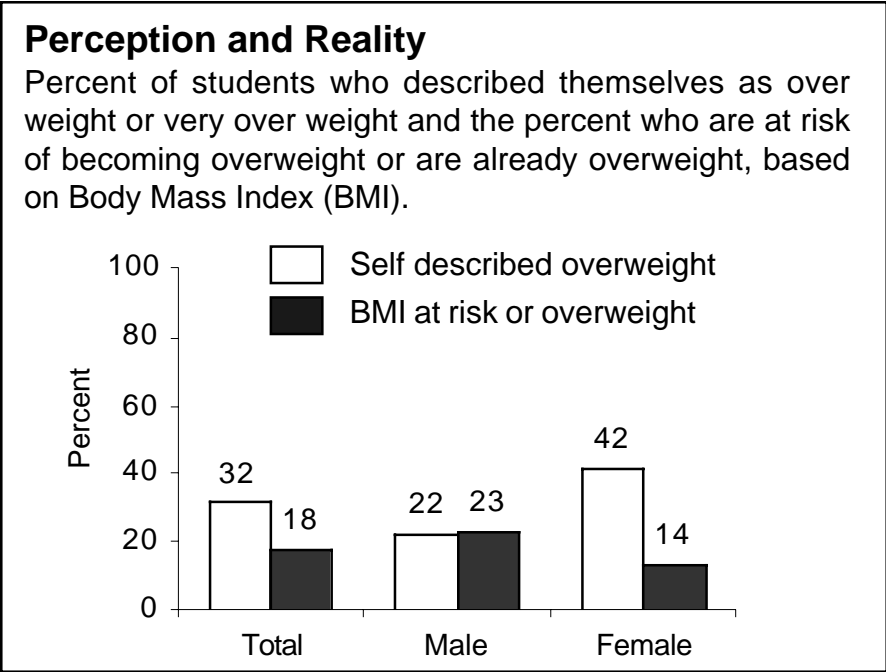
None	during the past seven days . . .	Every Day
16%	drank 100% fruit juice	30%
10%	ate fruit	27%
29%	ate green salad	11%
17%	ate potatoes	10%
43%	ate carrots	5%
11%	ate other vegetables	23%
11%	drank milk	60%



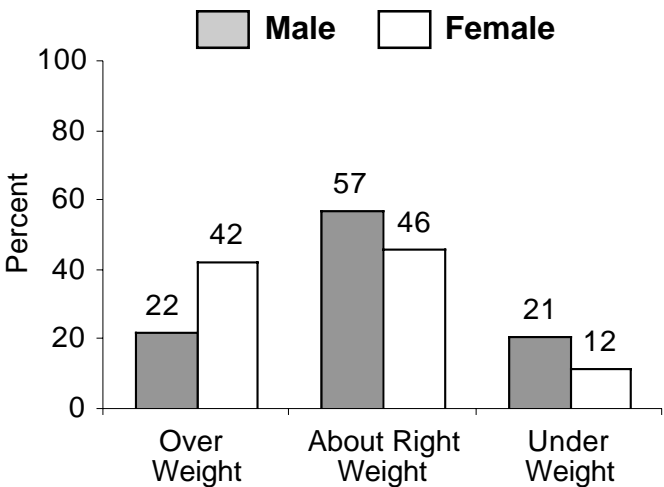
# Obesity, Dieting, and Eating Disorders . . .

## ◆ Adolescent Obesity

In the 1999 YRBS students were asked to report their height and weight. Self-reported height and weight measures were used to calculate body mass index (BMI), an estimate for how many students are overweight. Estimates based on self-reported height and weight are typically low, <sup>(21, 22)</sup> but still useful for tracking trends.



## How Students Describe Their Weight



## ◆ At Risk of Becoming Obese

Young people whose body mass index is at or above the 85th percentile and below the 95th percentile of reference data (NHANES 1) are considered at risk of becoming obese.

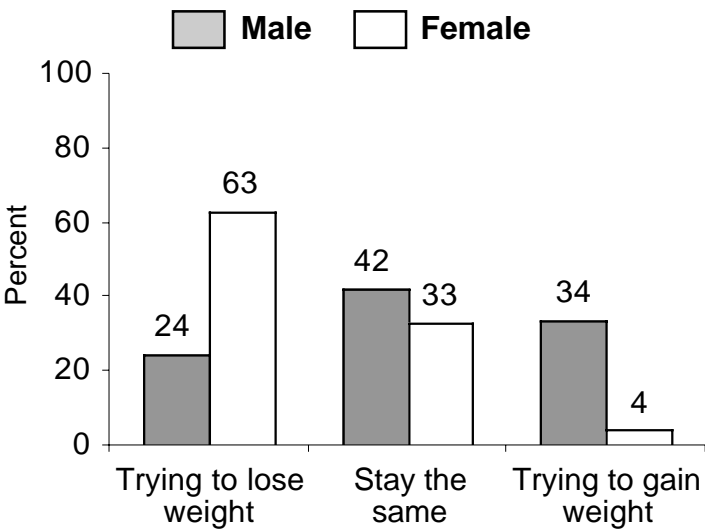
15% of the boys      10% of the girls

## ◆ Already Obese

Obesity is defined as having a body mass index greater than 95% of the reference data.

8% of the boys      5% of the girls

## What are you doing about your weight?



"I'm always trying to lose weight. I think most girls are. Most girls I know at least watch what they eat, but the boys sure don't."  
—16-year-old girl

## Methods Used to Lose Weight or to Keep From Gaining Weight . . .

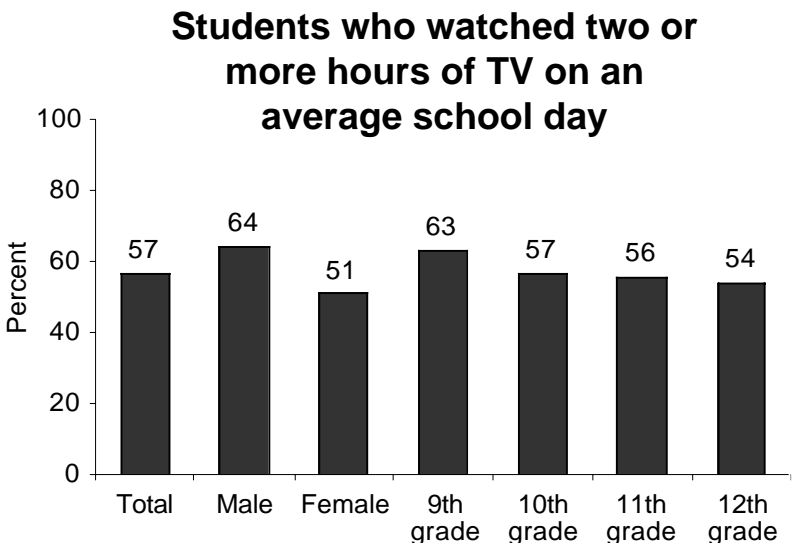
Males	in the past 30 days . . .	Females
47%	exercised	76%
20%	ate less food, fewer calories, low-fat food	63%
6%	went without eating for 24 or more hours	18%
3%	took diet pills, powders, or liquids without Dr.'s advice	10%
2%	vomited or took laxatives	7%

# Exercise . . .

- ◆ Patterns of adult exercise are established in childhood and adolescence. While still young, regular exercise encourages health and normal growth and development.<sup>19</sup>
- ◆ For adults, regular physical activity decreases the risk of death from heart disease, lowers the risk of diabetes, and is associated with a reduction in risk for colon cancer.<sup>23</sup>
- ◆ Regular physical exercise increases muscle and bone strength, increases lean muscle mass, decreases body fat, aids weight control, increases physiological well being, reduces the likelihood of depression and reduces anxiety.<sup>23</sup>
- ◆ Exercise and good nutrition are the two most significant ways individuals can take control of their own health.<sup>23</sup>
- ◆ The proportion of young people leaving high school with a commitment to regular exercise will likely become the adults who exercise regularly. Nationally and in Nebraska, this population is declining.

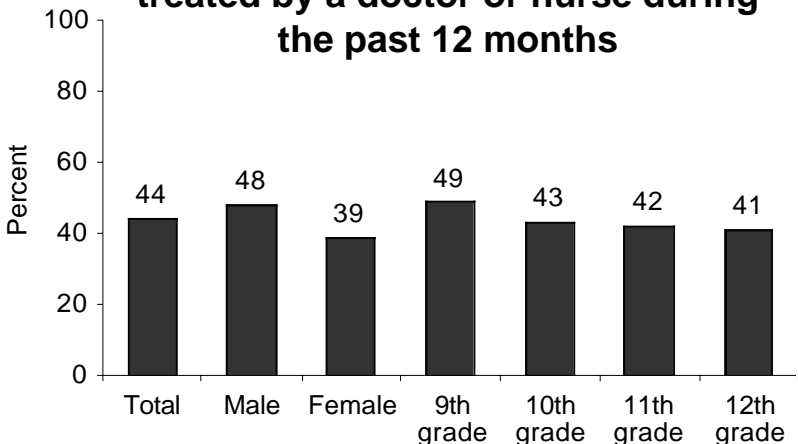
## Television: The other exercise

Television viewing is the most popular sedentary activity in the USA and has been shown to be associated with obesity.<sup>24</sup>



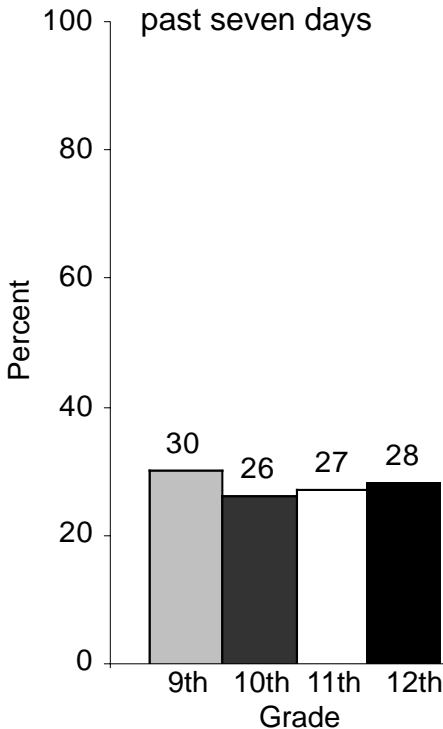
# Injuries . . .

**Students who were injured while exercising, playing sports, or being physically active and had to be treated by a doctor or nurse during the past 12 months**



## Aerobics (Light)

Percentage who participated in light physical activity for at least **30 minutes** on five or more of the past seven days



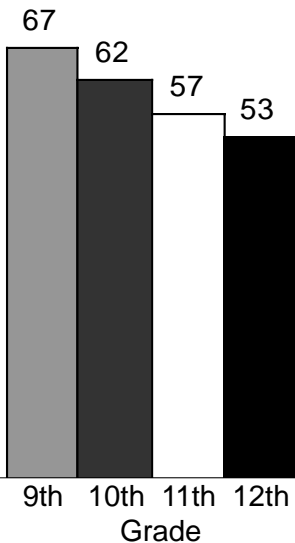
## Aerobics (Vigorous)

Percentage who participated in vigorous physical activity for at least **20 minutes** on three or more of the past seven days



## Strengthening

Percentage who did exercises to strengthen or tone muscles three or more of the past seven days

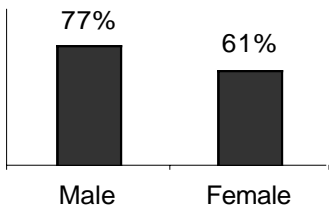


"Honest, I would not want to go to school at all if it weren't for certain sports. I love sports. Exercise is just part of sports, so that's why I'll stay with it."  
—18-year-old boy

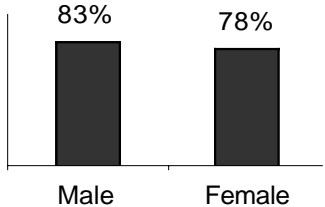
Gender Differences—Narrowing

Percentage of 9th-12th grade students who...

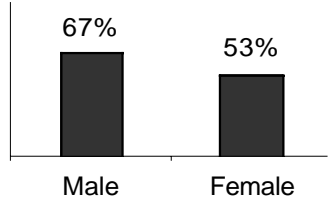
Exercised at least 20 minutes to sweat or breathe hard on at least 3 of past 7 days



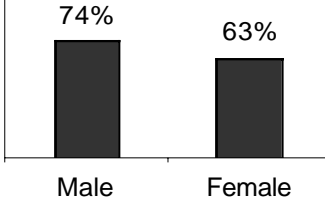
Enrolled in PE and exercised or played sports for more than 20 minutes during class



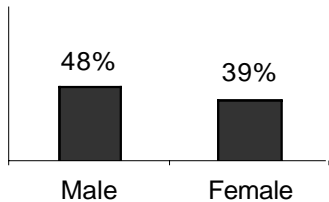
Did strengthening exercises on at least 3 of the past 7 days



Participated on one or more sports teams during the past 12 months



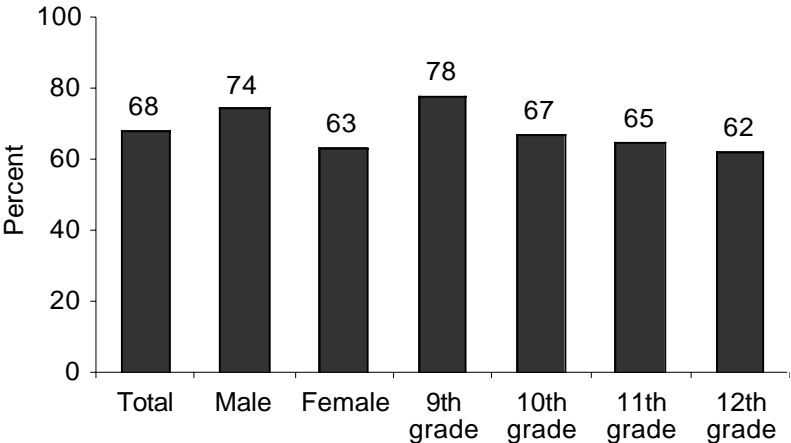
Were injured while exercising or playing sports requiring attention by a doctor or nurse during past 12 months



Sports . . .

Some students may be getting their exercise on a sports team rather than in physical education class. The sports team could be school-sponsored or outside the school. Are those the same students that are taking physical education classes? The YRBS does not answer this question.

Students playing on one or more sports teams during the past 12 months

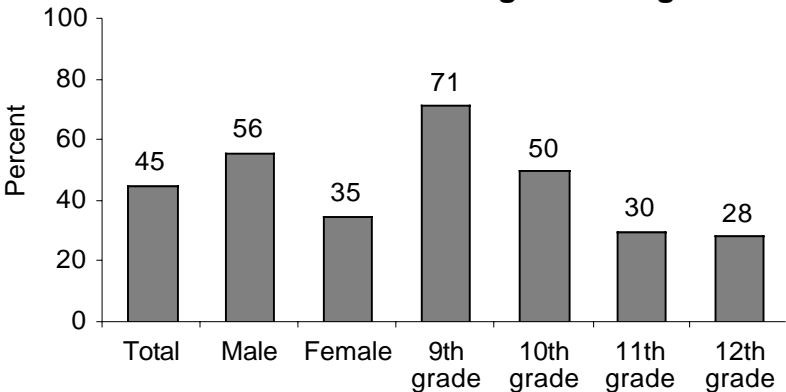


Physical Education Classes

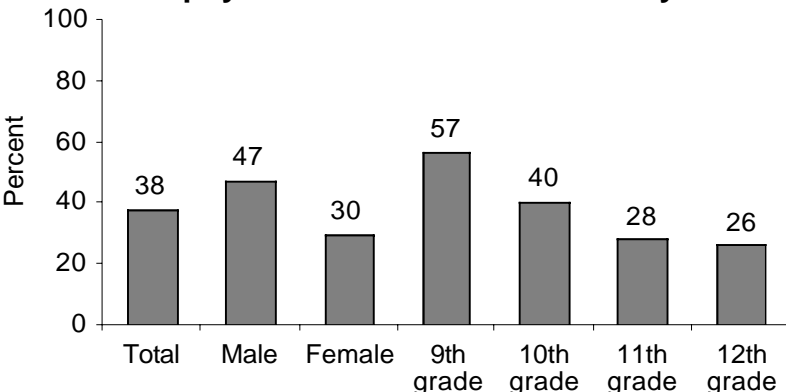
Are They Doing Their Job?

As students advance in grade, fewer attend physical education classes.

Percent of students who attend physical education classes during an average week

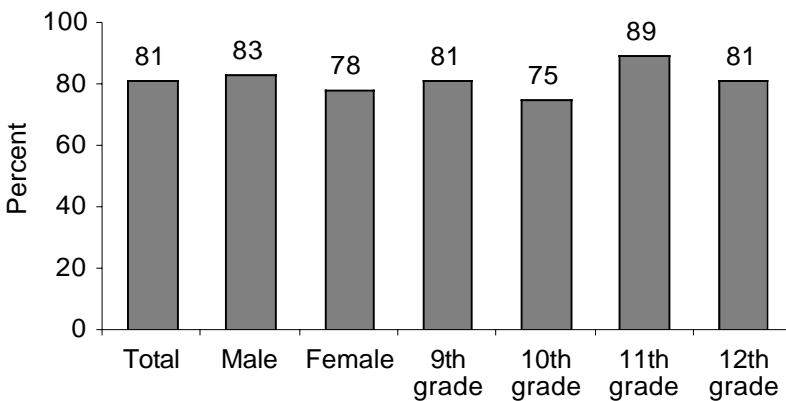


Percent of students who attend physical education classes daily



If students attend physical education class there is a great likelihood the classes will meet daily, especially in the higher grades.

Students enrolled in physical education who exercised or played sports for more than 20 minutes during their class



If students do attend physical education classes there is a great likelihood they will get at least a 20-minute workout.

The Question . . .

Are the students enrolling in physical education classes the ones who need it most, the more sedentary and possibly overweight students, or are they the more active students who self-select physical education classes because they enjoy them? There's nothing wrong with that, but what about those who don't enroll and could benefit the most?

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The Youth Risk Behavior Survey of 9<sup>th</sup>–12<sup>th</sup> grade students and this document are funded by PHHS Block Grant Funds from the Centers for Disease Control and Prevention. Data was gathered by the Buffalo Beach Company under a subcontract with the Nebraska Health and Human Services System. Alternate formats are available by calling 402-471-3995 or TDD 402-471-6421.

This publication was developed under the direction of the Nebraska Health and Human Services System.

Richard Raymond, M.D.  
Chief Medical Officer

Jim Dills  
Division Administrator  
Health Promotion and Education

Produced and printed by The Buffalo Beach Company, July 2000  
ADA/EOE/AA

## Detailed Tables

Including every question and all answer options for the grade 9–12 survey are available from:

The Buffalo Beach Company      Phone 402-477-1147  
P. O. Box 30705      Fax 402-477-8428  
Lincoln, NE 68503-0705      E-Mail buffalo@inetnebr.com

Cost is \$25 plus \$3 shipping and handling

## Nebraska Resources

The Nebraska Department of Health and Human Services System (NDHSS) and other state and local agencies have many programs to help educators and communities address the health risks that adolescents face.

*Injuries, intentional and unintentional:* Contact the NHHSS Injury Prevention and Control Program or the Traffic-Related Injury Prevention Program, 402-471-2101 (1-800-745-9311)

*Sexually transmitted diseases:* Contact the NHHSS Communicable Disease Section, 402-471-2937

*Tobacco use:* Contact the NHHSS Tobacco Free Nebraska Program, 402-471-2101 (1-800-745-9311)

*Drugs and alcohol:* Contact the NHHSS Division on Alcoholism and Drug Abuse, 402-471-2851

*Physical Fitness/Nutrition:* Contact the NHHSS Cardiovascular Program, 402-471-2101 (1-800-745-9311), or the Comprehensive School Health Program at the Department of Education, 402-471-4334

*School Health:* Contact the NHHSS School and Adolescent Health Program, 402-471-0160 or 471-2771

This is by no means an exhaustive list of resources; it's only the beginning. For more information and referral to other resources, contact one of the following state offices:

Health and Human Services      402-471-2101  
Department of Education      402-471-4334  
Your local health department or community action agency.